| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| EASTERN DISTRICT OF WISCONSIN | - | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | | | |
|----|---|---|---|--|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
| 1. | Your full name | | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture | Darren First name M. Middle name Chancellor | First name Middle name | | |
| | identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | | |
| 2. | All other names you have used in the last 8 years | | | | |
| | Include your married or maiden names. | | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-5922 | | | |

| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
|----|---|---|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | | ☐ I have not used any business name or EINs. |
| | Include trade names and doing business as names | Business name(s) | | Business name(s) |
| | | EINs | | EINs |
| 5. | Where you live | | | If Debtor 2 lives at a different address: |
| | | 280 Walnut Street Manawa, WI 54949 | | |
| | | Number, Street, City, State & ZIP Code | • | Number, Street, City, State & ZIP Code |
| | | Waupaca County | | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | | |

| Debtor 1 Darren M. Chance | | | ellor | | | Case number (if known) | | |
|---------------------------|---|---|--|--|--|---|--|---|
| | | | | | | | | |
| Par | t 2: | Tell the Court About | Your Bankrupto | y Case | | | | |
| 7. | Banl | The chapter of the Bankruptcy Code you are choosing to file under | | | | | | ng for Bankruptcy |
| | CHOC | ising to me under | ■ Chapter 7 | | | | | |
| | | | ☐ Chapter 11 | | | | | |
| | | | ☐ Chapter 12 | | | | | |
| | | | ☐ Chapter 13 | | | | | |
| 8. | How | you will pay the fee | about ho order. If a pre-pri | w you may pay. Ty your attorney is su nted address. | ypically, if you are paying bmitting your payment o | g the fee yourself, you r n your behalf, your atto | erk's office in your local contains the series of the seri | r's check, or money it card or check with |
| | | | The Filing I request but is not that applied | g Fee in Installme t that my fee be v t required to, waive ies to your family: | nts (Official Form 103A). vaived (You may reques e your fee, and may do s size and you are unable | t this option only if you o only if your income is to pay the fee in installr | are filing for Chapter 7. B less than 150% of the of ments). If you choose this a 103B) and file it with you | y law, a judge may, ficial poverty line option, you must fill |
| 9. | bank | you filed for ruptcy within the | ■ No. | | | | | |
| | last | 3 years? | ☐ Yes. | | M/Is a se | | One a more bare | |
| | | | | | | | | |
| | | | | trict | When When | | | |
| | | | 210 | | | | | |
| 10. | case filed not f you, parti | nny bankruptcy s pending or being by a spouse who is iling this case with or by a business ner, or by an | ■ No □ Yes. | | | | | |
| | affili | ate? | Del | ator | | | Relationship to you | |
| | | | | trict | When | | Case number, if known | |
| | | | Del | | | | Relationship to you | |
| | | | Dis | trict | When | | Case number, if known | |
| 11. | | ou rent your | ■ No. G | o to line 12. | | | | |
| | resid | lence? | ☐ Yes. Ha | as your landlord ob | otained an eviction judgm | nent against you and do | you want to stay in your | residence? |
| | | | | No. Go to lin | e 12. | | | |
| | | | | Yes. Fill out bankruptcy p | | n Eviction Judgment A | gainst You (Form 101A) a | nd file it with this |
| | | | | | | | | |

| Deb | otor 1 Darren M. Chance | llor | | | Case number (if known) |
|-----|---|----------|---------------------------|--|--|
| Par | t 3: Report About Any Bu | sinesses | You Own | as a Sole Proprie | tor |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Name | and location of bus | siness |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, Sta | tte & ZIP Code |
| | it to this petition. | | Chec | | ox to describe your business: |
| | | | | | ness (as defined in 11 U.S.C. § 101(27A)) |
| | | | | _ | I Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | ` | defined in 11 U.S.C. § 101(53A)) |
| | | | | - | er (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | 0 |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline | s. If you ir s, cash-f | ndicate that you are ow statement, and | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure |
| | For a definition of small | ■ No. | I am ı | not filing under Chap | oter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am f Code | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| Par | t 4: Report if You Own or | Have Any | / Hazardo | ous Property or An | y Property That Needs Immediate Attention |
| 14. | Do you own or have any property that poses or is | ■ No. | | | |
| | alleged to pose a threat of imminent and identifiable hazard to public health or safety? | ☐ Yes. | What is | the hazard? | |
| | Or do you own any property that needs immediate attention? | | | diate attention is why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | |
| | | | | | Number, Street, City, State & Zip Code |
| | | | | | |

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 davs.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a

mental deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active П

military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing

in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb | tor 1 Darren M. Chance | llor | | | Case number (ii | f known) |
|------|--|--|---|-------------------------------------|-----------------------|--|
| Part | 6: Answer These Questi | ons for Rep | orting Purposes | | | |
| 16. | What kind of debts do you have? | 16a. A | | | | d in 11 U.S.C. § 101(8) as "incurred by an |
| | | | No. Go to line 16b. | | | |
| | | | Yes. Go to line 17. | | | |
| | | | re your debts primarily busing oney for a business or investm | | | |
| | | | No. Go to line 16c. | | | |
| | | | Yes. Go to line 17. | | | |
| | | 16c. S | tate the type of debts you owe t | that are not consum | ner debts or business | debts |
| 17. | Are you filing under Chapter 7? | □ No. I | am not filing under Chapter 7. G | Go to line 18. | | |
| | Do you estimate that after any exempt property is excluded and | | am filing under Chapter 7. Do y cpenses are paid that funds will | | | ry is excluded and administrative reditors? |
| | administrative expenses are paid that funds will | | No | | | |
| | be available for distribution to unsecured creditors? | | l Yes | | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | | ☐ 25,001-50,000 |
| | you estimate that you owe? | 50-99 | | 5001-10,000 | _ | ☐ 50,001-100,000 |
| | | ☐ 100-199 ☐ 200-999 | | □ 10,001-25,000 | 0 | ☐ More than100,000 |
| 19. | How much do you | \$ 0 - \$50 | 000 | □ \$1,000,001 - 3 | \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your assets to be worth? | □ \$50,001 | - \$100,000 | \$10,000,001 | | □ \$1,000,000,001 - \$10 billion |
| | oc worm. | | I - \$500,000 I - \$1 million | □ \$50,000,001 - □ \$100,000,001 | | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion |
| 20. | How much do you | □ \$0 - \$50 | 000 | □ \$1,000,001 - 3 | \$10 million | □ \$500,000,001 - \$1 billion |
| | estimate your liabilities to be? | \$50,001 | • • | □ \$10,000,001 - | | \$1,000,000,001 - \$10 billion |
| | | | 1 - \$500,000 1 - \$1 million | □ \$50,000,001 - □ \$100,000,001 | | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |
| Part | 7: Sign Below | | | | | |
| For | you | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. | | | | |
| | | | | | | nder Chapter 7, 11,12, or 13 of title 11, use to proceed under Chapter 7. |
| | | | y represents me and I did not p have obtained and read the no | | | n attorney to help me fill out this |
| | | I request re | ief in accordance with the chap | oter of title 11, United | d States Code, specif | ied in this petition. |
| | | bankruptcy 1519, and 3 | case can result in fines up to \$2 571. | | | property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, |
| | | | M. Chancellor Chancellor Debtor 1 | | Signature of Debtor 2 | |
| | | Ü | February 29, 2016 MM / DD / YYYY | | Executed on MM / D | DD / YYYY |

| Debtor 1 Darren M. Chance | ellor | Cas | Case number (if known) | | |
|--|--|--------------------------|--|--|--|
| | | | | | |
| For your attorney, if you are represented by one | | ed States Code, and have | e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § | | |
| f you are not represented by an attorney, you do not need to file this page. | 342(b) and, in a case in which § 707(b)(4)(D) in the schedules filed with the petition is income | | no knowledge after an inquiry that the information | | |
| 1.3 | /s/ Timothy J. Helbing | Date | February 29, 2016 | | |
| | Signature of Attorney for Debtor | | MM / DD / YYYY | | |
| | Timothy J. Helbing Printed name | | | | |
| | Helbing Law Office, LLC Firm name | | | | |
| | 477 S. Nicolet Road, Suite 8 | | | | |
| | Appleton, WI 54914 Number, Street, City, State & ZIP Code | | | | |
| | Contact phone 920-955-3688 | Email address | tjh@helbinglaw.com | | |
| | 1037603 | | | | |
| | Bar number & State | | | | |

| Fill | in this information to identify your case: | | | | |
|-----------------|--|--------------------------|---|---------------|---------------------------------|
| Deb | tor 1 Darren M. Chancellor | | | | |
| Deb | | Middle Name | Last Name | | |
| | | Middle Name | Last Name | | |
| Unit | ed States Bankruptcy Court for the:EAST | TERN DISTRICT OF W | VISCONSIN | | |
| Case (if kno | e number | | | | ck if this is an nded filing |
| | | | | ame | nded ming |
| Off | ioial Farm 1065um | | | | |
| | icial Form 106Sum mary of Your Assets and I | iahilities and | Certain Statistical Information | , | 12/15 |
| Be as | s complete and accurate as possible. If tw mation. Fill out all of your schedules first original forms, you must fill out a new Sa | vo married people are | e filing together, both are equally responsible formation on this form. If you are filing amo | e for supply | ing correct |
| ran | Cummanizo 1941 / 1860te | | | | assets of what you own |
| 1. | Schedule A/B: Property (Official Form 106 1a. Copy line 55, Total real estate, from Sci | SA/B) hedule A/B | | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, fr | rom Schedule A/B | | \$ | 42,089.50 |
| | 1c. Copy line 63, Total of all property on Sc | hedule A/B | | \$ | 42,089.50 |
| Part | 2: Summarize Your Liabilities | | | | |
| | | | | | liabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims S 2a. Copy the total you listed in Column A, A | | ficial Form 106D) bottom of the last page of Part 1 of <i>Schedule I</i> | o \$ | 9,204.00 |
| 3. | Schedule E/F: Creditors Who Have Unsect 3a. Copy the total claims from Part 1 (prior | | rm 106E/F) rom line 6e of <i>Schedule E/F</i> | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonp | priority unsecured claim | ns) from line 6j of Schedule E/F | \$ | 124,579.13 |
| | | | Your total liabilitie | es \$ | 133,783.13 |
| Part | 3: Summarize Your Income and Exper | nses | | | |
| 4. | Schedule I: Your Income (Official Form 106 Copy your combined monthly income from | | | \$ | 1,763.00 |
| 5. | Schedule J: Your Expenses (Official Form Copy your monthly expenses from line 22c | | | \$ | 1,780.00 |
| Part | 4: Answer These Questions for Admin | istrative and Statistic | al Records | | |
| 6. | Are you filing for bankruptcy under Chap ☐ No. You have nothing to report on this | | k this box and submit this form to the court with | your other s | schedules. |
| 7. | ■ Yes What kind of debt do you have? | | | | |
| | | | s are those "incurred by an individual primarily or statistical purposes. 28 U.S.C. § 159. | for a persona | al, family, or |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,371.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Bort 4 on Cohodula E/E comushe followings | Total o | claim |
|--|---------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 85,292.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 85,292.00 |

Best Case Bankruptcy

| Fill i | n this inform | nation to identify your case a | and this filing: | | |
|----------------|--|---|--|---|---|
| Debt | or 1 | Darren M. Chancellor | | | |
| 5 | | First Name | Middle Name Last Name | | |
| Debt (Spous | or 2 se, if filing) | First Name | Middle Name Last Name | | |
| l Inite | nd States Bar | nkruptcy Court for the: EAST | FERN DISTRICT OF WISCONSIN | | |
| Office | tu States Dai | iki upicy Court for the | TERM DISTRICT OF WISCONSIN | | |
| Case | number | | <u></u> | | ☐ Check if this is an |
| | | | | | amended filing |
| | | | | | |
| Off. | icial For | rm 106A/B | | | |
| Sc | hedule | A/B: Property | V | | 12/15 |
| | | | List an asset only once. If an asset fits in more than or | ne category, list the asset in the | |
| t fits l | est. Be as co | mplete and accurate as possible | e. If two married people are filing together, both are equ is form. On the top of any additional pages, write your n | ally responsible for supplying | correct information. If |
| nore: | | eu, attach a separate sheet to thi | is form. On the top of any additional pages, write your n | ame and case number (ii know | vii). Aliswei every questioi |
| Part ' | Describe E | Each Residence, Building, Land, | or Other Real Estate You Own or Have an Interest In | | |
| l. Do | you own or ha | ave any legal or equitable interes | st in any residence, building, land, or similar property? | | |
| _ | | | | | |
| _ | No. Go to Part | | | | |
| | Yes. Where is | the property? | | | |
| Part 2 | Describe Y | our Vehicles | | | |
| | | | | | |
| some | | icks, tractors, sport utility ve | o report it on Schedule G: Executory Contracts and ehicles, motorcycles | <i></i> | |
| some B. Ca | ırs, vans, tru | • | · | | |
| some 3. Ca | nrs, vans, tru No | • | · | | |
| some B. Ca | n rs, vans, tru No Yes | • | · | Do not deduct secured cla | |
| some 3. Ca | nrs, vans, tru No Yes Make: C | cks, tractors, sport utility ve | ehicles, motorcycles | | d claims on Schedule D: |
| some 3. Ca | No Yes Make: C Model: T Year: 2 | Chevrolet | who has an interest in the property? Check one Debtor 1 only Debtor 2 only | Do not deduct secured clatte amount of any secure Creditors Who Have Claim Current value of the | d claims on Schedule D: ms Secured by Property. Current value of the |
| some 3. Ca | Make: C Model: T Year: 2 Approximate | Chevrolet Trailblazer 2003 mileage: 170,000 | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured cla the amount of any secure Creditors Who Have Clair | d claims on Schedule D: ms Secured by Property. |
| some 3. Ca | No Yes Make: C Model: T Year: 2 | Chevrolet Trailblazer 2003 mileage: 170,000 | who has an interest in the property? Check one Debtor 1 only Debtor 2 only | Do not deduct secured clatte amount of any secure Creditors Who Have Claim Current value of the | d claims on Schedule D: ms Secured by Property. Current value of the |
| 3. C a | Make: C Model: T Year: 2 Approximate | Chevrolet Trailblazer 2003 mileage: 170,000 | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured clatte amount of any secure Creditors Who Have Claim Current value of the | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? |
| some 3. Ca | Make: C Model: T Year: 2 Approximate Other informs | Chevrolet Crailblazer 2003 Chienes 170,000 Chevrolet | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property | Do not deduct secured class the amount of any secure Creditors Who Have Clain Current value of the entire property? \$5,175.00 | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$5,175.00 |
| some 3. Ca | Make: U | Chevrolet Trailblazer 2003 Tmileage: 170,000 ation: | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property | Do not deduct secured clatte amount of any secure Creditors Who Have Clair Current value of the entire property? | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$5,175.00 |
| 3. Ca | Make: Other informate Make: Vear: V | Chevrolet Trailblazer 2003 mileage: 170,000 ation: | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only | Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property? \$5,175.00 Do not deduct secured cla | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$5,175.00 aims or exemptions. Put d claims on Schedule D: |
| 3. Ca | Make: Other informate Make: Vans, true Model: T Year: 2 Approximate Other informate Make: Vans Model: G Year: 1 | Chevrolet Trailblazer 2003 mileage: 170,000 ation: | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only | Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property? \$5,175.00 Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$5,175.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the |
| 3. Ca | Make: Other information Model: Model: Vear: 1 Model: Vear: 1 Approximate | Chevrolet Crailblazer 2003 2 mileage: 170,000 ation: Colkswagon Golf 993 2 mileage: 170,000 | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured class the amount of any secure Creditors Who Have Clain Current value of the entire property? \$5,175.00 Do not deduct secured class the amount of any secure Creditors Who Have Clain | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$5,175.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. |
| 3. Ca | Make: Other informate Make: Vans, true Model: T Year: 2 Approximate Other informate Make: Vans Model: G Year: 1 | Chevrolet Crailblazer 2003 2 mileage: 170,000 ation: Colkswagon Golf 993 2 mileage: 170,000 | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only | Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property? \$5,175.00 Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property? | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$5,175.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the |
| 3. Ca | Make: Other information Model: Model: Vear: 1 Model: Vear: 1 Approximate | Chevrolet Crailblazer 2003 2 mileage: 170,000 ation: Colkswagon Golf 993 2 mileage: 170,000 | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property? \$5,175.00 Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$5,175.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? |
| 3. Ca | Make: V Model: T Year: 2 Approximate Other informs Make: V Model: Year: 1 Approximate Other informs | Chevrolet Crailblazer 2003 Imileage: 170,000 ation: Colkswagon Golf 993 Imileage: 170,000 ation: | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$5,175.00 Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$2,000.00 | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$5,175.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$2,000.00 |
| 3. C a | Make: Compared to the control of the | Chevrolet Trailblazer 2003 mileage: 170,000 ation: Colkswagon Golf 993 mileage: 170,000 ation: | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property? \$5,175.00 Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property? | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$5,175.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$2,000.00 |
| 3. Ca 3.1 | Make: Vaproximate Other informs | Chevrolet Crailblazer CO03 Colkswagon Colf Colf Colf Colf Colf Colf Colf Colf | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property? Check one Check if this is community property (see instructions) | Do not deduct secured class the amount of any secure Creditors Who Have Clain Current value of the entire property? \$5,175.00 Do not deduct secured class the amount of any secure Creditors Who Have Clain Current value of the entire property? \$2,000.00 | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$5,175.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$2,000.00 aims or exemptions. Put d claims on Schedule D: |
| 3.1 3.2 | Make: V Model: Year: 1 Approximate Other inform: Make: V Model: G Year: 1 Approximate Other inform: Make: Other inform: Make: Other inform: Make: Other inform: | Chevrolet Crailblazer CO03 Colkswagon Colf Cols Cols Cols Cols Cols Cols Cols Cols | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property? Check one Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only | Do not deduct secured class the amount of any secure Creditors Who Have Clain Current value of the entire property? \$5,175.00 Do not deduct secured class the amount of any secure Creditors Who Have Clain Current value of the entire property? \$2,000.00 Do not deduct secured class the amount of any secure Creditors Who Have Clain Current value of the amount of any secure Creditors Who Have Clain Current value of the | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$5,175.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$2,000.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the |
| 3.1 3.2 | Make: V Model: Year: 1 Approximate Other informs Make: V Model: 1 Approximate Other informs Make: C Model: C | Chevrolet Frailblazer 2003 Imileage: 170,000 Interest 170,000 | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property? Check one Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$5,175.00 Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$2,000.00 Do not deduct secured class the amount of any secure Creditors Who Have Clair | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$5,175.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$2,000.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. |
| 3.1 3.2 | Make: V Model: Year: 1 Approximate Other inform: Make: V Model: G Year: 1 Approximate Other inform: Make: Other inform: Make: Other inform: Make: Other inform: | Chevrolet Frailblazer 2003 Imileage: 170,000 Interest 170,000 | who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property? Check one Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only | Do not deduct secured class the amount of any secure Creditors Who Have Clain Current value of the entire property? \$5,175.00 Do not deduct secured class the amount of any secure Creditors Who Have Clain Current value of the entire property? \$2,000.00 Do not deduct secured class the amount of any secure Creditors Who Have Clain Current value of the amount of any secure Creditors Who Have Clain Current value of the | d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$5,175.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$2,000.00 aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the |

Schedule A/B: Property Official Form 106A/B page 1

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| Debtor 1 Darren M. Chancellor | | ellor | Case number (if known) | | | | |
|-------------------------------|---|---|-------------------------------|---|------------------------------|---|--|
| 3.4 | Model: Year: Approxir | Kawasaki ZX-6R 2000 mate mileage: formation: | 24547 | Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | the amount of any se | portion you own? | |
| | | | | ☐ Check if this is community property (see instructions) | \$2,000.0 | <u> </u> | |
| E | xamples: E ■ No ■ Yes | Boats, trailers, moto | rs, personal wa | d other recreational vehicles, other vehicles tercraft, fishing vessels, snowmobiles, motorcy near the control of the control | cle accessories | | |
| | | | | that number here | | \$12,605.00 | |
| Par | t 3: Descri | ibe Your Personal and | d Household Ite | ms | | | |
| | | | | terest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. | |
| _ | ⊒ No ■ Yes. De | Bec tele sto | vision stand ve, washer, d | tables, chairs, desks, computer, books , vacuum cleaner, microwave, refrigera dryer, television, stereo, and VCR and o tems of diminimus value. | tor, toaster, | \$2,500.00 | |
| j | Electronics Examples: ■ No □ Yes. De | Televisions and rac including cell phone | | eo, stereo, and digital equipment; computers, pr edia players, games | rinters, scanners; music co | illections; electronic devices | |
| | Examples: | s of value Antiques and figuri other collections, n | | prints, or other artwork; books, pictures, or othe llectibles | er art objects; stamp, coin, | or baseball card collections; | |
| | ■ No □ Yes. De | escribe | | | | | |
| | Examples: _ | t for sports and ho Sports, photograph musical instrument | ic, exercise, ar | d other hobby equipment; bicycles, pool tables, | , golf clubs, skis; canoes a | nd kayaks; carpentry tools; | |
| | ■ No □ Yes. De | escribe | | | | | |
| _ | Firearms Examples No | s: Pistols, rifles, sho | tguns, ammuni | tion, and related equipment | | | |
| | ⊒ Yes. De | escribe | | | | | |
| [| Clothes Examples ☐ No ■ Yes. De | | furs, leather co | oats, designer wear, shoes, accessories | | | |

Official Form 106A/B

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| Debtor 1 | Darren M. C | hancelle | or | Case number (if know | n) |
|---------------------|--|-----------|---|---|---|
| | | Clothe | es | | \$1,000.00 |
| ☐ No | | welry, co | stume jewelry, enga | agement rings, wedding rings, heirloom jewelry, watches, gem | s, gold, silver |
| | | Misce | llaneous jewelry | , | \$250.00 |
| <i>Exan</i> ■ No | farm animals apples: Dogs, cats, b. Describe | birds, ho | rses | | |
| ■ No | ther personal and | | | not already list, including any health aids you did not list | : |
| | | | | Part 3, including any entries for pages you have attached | \$3,750.00 |
| | escribe Your Finan wn or have any l | | | n any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No □ Yes | sits of money | | | ome, in a safe deposit box, and on hand when you file your pe | |
| <i>Exan</i> □ No | | | | counts; certificates of deposit; shares in credit unions, brokera is with the same institution, list each. | ge houses, and other similar |
| | s | | | Institution name: | |
| | | 17.1. | Checking | First Merit Bank | \$70.00 |
| | | 17.2. | Savings | First Merit Bank | \$400.00 |
| Exan | | | cly traded stocks ent accounts with bi | rokerage firms, money market accounts | |
| ■ No □ Yes | j | | Institution or issuer | name: | |
| | oublicly traded si joint venture | tock and | interests in incorp | oorated and unincorporated businesses, including an inte | rest in an LLC, partnership, |
| | s. Give specific in | | about themne of entity: | % of ownership: | |
| Nego | otiable instruments | include p | oersonal checks, ca | otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them. | |

Official Form 106A/B Schedule A/B: Property page 3

| Debtor 1 | Darren M. Chancellor | | Case number (if known) | |
|---------------------------|---|--|--|--|
| ☐ Yes | . Give specific information about th | | | |
| | ement or pension accounts aples: Interests in IRA, ERISA, Keo | gh, 401(k), 403(b), thrift savings accounts, or o | ther pension or profit-sharing plans | |
| ■ Yes | . List each account separately. Type of accou | nt: Institution name: | | |
| | 401(k) | | | \$7,000.00 |
| Your | | ave made so that you may continue service or or repaid rent, public utilities (electric, gas, water) | | or others |
| | | Institution name or individua | al: | |
| _ | ities (A contract for a periodic payn | nent of money to you, either for life or for a num | nber of years) | |
| ■ No □ Yes | lssuer name and de | escription. | | |
| 26 U.S | sts in an education IRA, in an acc c.C. §§ 530(b)(1), 529A(b), and 529 | count in a qualified ABLE program, or under (b)(1). | a qualified state tuition program | ı. |
| ■ No □ Yes | Institution name an | d description. Separately file the records of any | / interests.11 U.S.C. § 521(c): | |
| | s, equitable or future interests in | property (other than anything listed in line | 1), and rights or powers exercisa | ble for your benefit |
| ■ No □ Yes | . Give specific information about the | nem | | |
| | | secrets, and other intellectual property ites, proceeds from royalties and licensing agr | reements | |
| ■ Yes | . Give specific information about the | nem | | |
| | Debto | has self-published two books | | \$0.00 |
| Exam ■ No | ses, franchises, and other general ples: Building permits, exclusive lides. Give specific information about the | enses, cooperative association holdings, liquo | r licenses, professional licenses | |
| Money or | property owed to you? | | (| Current value of the |
| | | | j | oortion you own? Oo not deduct secured claims or exemptions. |
| 28. Tax re ■ No | efunds owed to you | | | |
| ☐ Yes | . Give specific information about th | em, including whether you already filed the retu | urns and the tax years | |
| | y support nples: Past due or lump sum alimor | y, spousal support, child support, maintenance | e, divorce settlement, property settle | ement |
| ■ Yes | . Give specific information | | | |
| | | | | |
| | | | Child Support | \$15,000.00 |

Official Form 106A/B Schedule A/B: Property page 4

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| De | ebtor 1 | Darren M. Chancellor | Case number (if known) | |
|-----|---------------------------|---|--|----------------------------|
| 30. | Examp | amounts someone owes you oles: Unpaid wages, disability ir benefits; unpaid loans you | nsurance payments, disability benefits, sick pay, vacation pay, workers' compe u made to someone else | nsation, Social Security |
| | □ No ■ Yes. | Give specific information | | |
| | | | Waupaca County Case No: 11-SC-1410 | \$2,004.50 |
| | | | Chancellor v. Misty Guyetter & Joseph Lynch | \$3,264.50 |
| 31. | Examµ □ No | | surance; health savings account (HSA); credit, homeowner's, or renter's insurar | nce |
| | ■ Yes. | Name the insurance company Compan | of each policy and list its value. y name: Beneficiary: | Surrender or refund value: |
| | | Term ir | nsurance through employer | \$0.00 |
| 32. | If you a some of | | you from someone who has died ust, expect proceeds from a life insurance policy, or are currently entitled to rec | eive property because |
| 33. | Exam _l □ No | | er or not you have filed a lawsuit or made a demand for payment sputes, insurance claims, or rights to sue | |
| | - res. | Describe each daim | | |
| | | | Worker's Compensation Claim Attorney Peter Culp | Unknown |
| | | | Attorney reter outp | |
| 34. | Other o | contingent and unliquidated | claims of every nature, including counterclaims of the debtor and rights to | set off claims |
| | ☐ Yes. | Describe each claim | | |
| 35. | Any fin | nancial assets you did not alr | eady list | |
| | ☐ Yes. | Give specific information | | |
| 36 | | | entries from Part 4, including any entries for pages you have attached | \$25,734.50 |
| Pa | art 5: De | scribe Any Business-Related Prop | perty You Own or Have an Interest In. List any real estate in Part 1. | |
| 37. | Do you o | own or have any legal or equitable | interest in any business-related property? | |
| | No. Go | to Part 6. | | |
| | ☐ Yes. G | Go to line 38. | | |
| Pa | | scribe Any Farm- and Commercia ou own or have an interest in farmla | il Fishing-Related Property You Own or Have an Interest In. nd, list it in Part 1. | |
| 46. | Do you | ı own or have any legal or eq | uitable interest in any farm- or commercial fishing-related property? | |
| | ■ No. | Go to Part 7. | | |
| | ☐ Yes | . Go to line 47. | | |
| Pa | art 7: | Describe All Property You Own | or Have an Interest in That You Did Not List Above | |

Official Form 106A/B Schedule A/B: Property page 5

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| Debtor | 1 Darren M. Chancellor | | Case number (if known) | |
|----------------|--|-----------------|------------------------------|-------------|
| | you have other property of any kind you did not already list amples: Season tickets, country club membership | ? | | |
| ■ N | o | | | |
| ΠY | es. Give specific information | | | |
| 54. A d | dd the dollar value of all of your entries from Part 7. Write th | nat number here | | \$0.00 |
| Part 8: | List the Totals of Each Part of this Form | | | |
| 55. P a | art 1: Total real estate, line 2 | | | \$0.00 |
| 56. P a | art 2: Total vehicles, line 5 | \$12,605.00 | - | |
| 57. P a | art 3: Total personal and household items, line 15 | \$3,750.00 | | |
| 58. P a | art 4: Total financial assets, line 36 | \$25,734.50 | | |
| 59. P a | art 5: Total business-related property, line 45 | \$0.00 | | |
| 60. P a | art 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. P a | art 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62 T a | otal personal property. Add lines 56 through 61 | \$42 089 50 | Conv personal property total | \$42 089 50 |

63. Total of all property on Schedule A/B. Add line 55 + line 62

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\$42,089.50

| Fill in this infor | Fill in this information to identify your case: | | | | | | |
|---------------------|---|--------------------|--------------|--|-----------------------|--|--|
| Debtor 1 | Darren M. Chance | | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT C | DF WISCONSIN | | | | |
| Case number | | | | | | | |
| (if known) | | | | | ☐ Check if this is an | | |
| | | | | | amended filing | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement

| exe | ds—may be unlimited in dollar amount. Hovernption to a particular dollar amount and the applicable statutory amount. | | | | | | | |
|-----|--|--|--------------------------------------|---|------------------------------------|--|--|--|
| Pa | Itt 1: Identify the Property You Claim as E | xempt | | | | | | |
| 1. | Which set of exemptions are you claiming | ? Check one only, eve | en if y | our spouse is filing with you. | | | | |
| | ■ You are claiming state and federal nonban | kruptcy exemptions. | 11 U. | S.C. § 522(b)(3) | | | | |
| | ☐ You are claiming federal exemptions. 11 | U.S.C. § 522(b)(2) | | | | | | |
| 2. | For any property you list on Schedule A/B | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | he Amount of the exemption you claim | | Specific laws that allow exemption | | | |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | | | |
| | 2003 Chevrolet Trailblazer 170,000 miles | \$5,175.00 | | \$5,175.00 | Wis. Stat. § 815.18(3)(g) | | | |
| | Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | 1993 Volkswagon Golf 170,000 miles Line from Schedule A/B: 3.2 | \$2,000.00 | | \$2,000.00 | Wis. Stat. § 815.18(3)(g) | | | |
| | Line from Scriedule AVB: 3.2 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | 2000 Kawasaki ZX-6R 24547 miles Line from Schedule A/B: 3.4 | \$2,000.00 | | \$2,000.00 | Wis. Stat. § 815.18(3)(g) | | | |
| | LINE HOLL SCHEUUIE PVD. 3.4 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | Beds, dressers, tables, chairs, | \$2.500.00 | | \$2 500 00 | Wis. Stat. § 815.18(3)(d) | | | |

desks, computer, bookshelves, television stand, vacuum cleaner, microwave, refrigerator, toaster, stove, washer, dryer, television, stereo, and VCR and other miscellaneous items of diminimus

Line from Schedule A/B: 6.1

Official Form 106C

100% of fair market value, up to

any applicable statutory limit

| De | btor 1 Darren M. Chancellor | | | Case number (if known) | |
|----|--|--|--------------|---|------------------------------------|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| | Clothes Line from Schedule A/B: 11.1 | \$1,000.00 | | \$1,000.00 | Wis. Stat. § 815.18(3)(d) |
| | Line Holli Schedule A/B. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Miscellaneous jewelry Line from Schedule A/B: 12.1 | \$250.00 | | \$250.00 | Wis. Stat. § 815.18(3)(d) |
| | Ellie IIdili Genedale PAB. 1211 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Checking: First Merit Bank Line from Schedule A/B: 17.1 | \$70.00 | | \$70.00 | Wis. Stat. § 815.18(3)(k) |
| | Ellie IIdili Genedale PAB. TTT | | | 100% of fair market value, up to any applicable statutory limit | |
| | Savings: First Merit Bank Line from Schedule A/B: 17.2 | \$400.00 | | \$400.00 | Wis. Stat. § 815.18(3)(k) |
| | Line Holli Genedale AVB. 17.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 401(k): Line from Schedule A/B: 21.1 | \$7,000.00 | | \$7,000.00 | Wis. Stat. § 815.18(3)(j) |
| | Line Iron Schedule AVD. 21.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Child Support: Line from Schedule A/B: 29.1 | \$15,000.00 | | \$15,000.00 | Wis. Stat. § 815.18(3)(c) |
| | Ellie IIdili osiloddio 702. 2011 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Worker's Compensation Claim Attorney Peter Culp | Unknown | | \$0.00 | Wis. Stat. § 102.27 |
| | Line from Schedule A/B: 33.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/16 and every No | of more than \$155,67 3 years after that for ca | 5? ases f | iled on or after the date of adjustme | ent.) |
| | Yes. Did you acquire the property covered No Yes | ? | | | |

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| Debtor 1 | | ur case: | | | |
|--|--|---|--|---|--|
| - | Darren M. Char | | | | |
| Debtor 2 | First Name | Middle Name Last Name | | | |
| | First Name | Middle Name Last Name | | | |
| United States Bank | ruptcy Court for the | EASTERN DISTRICT OF WISCONSIN | | | |
| Casa numbar | | | | | |
| Case number | | | | ☐ Check | k if this is an |
| | | | | amen | ded filing |
| Official Form | 106D | | | | |
| Schedule D | : Creditors | Who Have Claims Secured | by Property | y | 12/15 |
| | | If two married people are filing together, both are equall i, number the entries, and attach it to this form. On the t | | | |
| I. Do any creditors ha | ve claims secured by | your property? | | | |
| ☐ No. Check th | nis box and submit | this form to the court with your other schedules. Yo | u have nothing else | to report on this form. | |
| ■ Yes. Fill in al | II of the information | below. | | | |
| Part 1: List All S | Secured Claims | | | | |
| 2. List all secured cla | ims. If a creditor has r | nore than one secured claim, list the creditor separately for | Column A | Column B | Column C |
| | | particular claim, list the other creditors in Part 2. As much der according to the creditor's name. | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| | • | • | value of collateral. | claim | If any |
| 2.1 Universal A | cceptance C | Describe the property that secures the claim: | \$9,204.00 | \$3,430.00 | \$5,774.00 |
| Greater & Hame | | 2008 Chevrolet Cobalt 170,000 miles | | | |
| 10801 Red (| Circle Dr | As of the date you file, the claim is: Check all that | | | |
| Minnetonka | | apply. ☐ Contingent | | | |
| Number, Street, Cit | ty, State & Zip Code | ☐ Unliquidated | | | |
| | | Disputed | | | |
| Who owes the debt | ? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only | | | ed | | |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor | or 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the | , | ☐ Judgment lien from a lawsuit | | | |
| Check if this claim community debt | | Other (including a right to offset) | | | |
| community debt | | | | | |
| | Opened 9/19/15 | | | | |
| | Last Active | | | | |
| | | Last 4 digits of account number 0001 | | | |
| Date debt was incurre | ed 1/29/16 | Last 4 digits of account number | | | |
| Date debt was incurre | ed <u>1/29/16</u> | Last 4 digits of account number 0001 | | | |
| | | | \$9.20 | 4 00 | |
| Add the dollar value | e of your entries in C | olumn A on this page. Write that number here: | \$9,20 \$9,20 | | |
| Add the dollar value | e of your entries in C | olumn A on this page. Write that number here: | \$9,20 \$9,20 | | |
| Add the dollar value If this is the last pag Write that number h | e of your entries in Coge of your form, add | olumn A on this page. Write that number here: | | | |
| Add the dollar value If this is the last pag Write that number h Part 2: List Other Use this page only if y to collect from you fo | e of your entries in Coge of your form, add nere: To see to Be Notified for you have others to be a debt you owe to see debts that you listed | olumn A on this page. Write that number here: the dollar value totals from all pages. | \$9,20 sady listed in Part 1. For a collection agency here | 4.00 or example, if a collection re. Similarly, if you have | more than one |
| Add the dollar value If this is the last pag Write that number hat the Italian | e of your entries in C ge of your form, add here: s to Be Notified for you have others to be r a debt you owe to s e debts that you listed hit this page. | olumn A on this page. Write that number here: the dollar value totals from all pages. or a Debt That You Already Listed e notified about your bankruptcy for a debt that you alresomeone else, list the creditor in Part 1, and then list the | \$9,20 sady listed in Part 1. For a collection agency here | 4.00 or example, if a collection re. Similarly, if you have | more than one |
| Add the dollar value If this is the last pag Write that number he Part 2: List Other Use this page only if to collect from you focreditor for any of the | e of your entries in C ge of your form, add here: s to Be Notified for you have others to be r a debt you owe to s e debts that you listed hit this page. | olumn A on this page. Write that number here: the dollar value totals from all pages. or a Debt That You Already Listed e notified about your bankruptcy for a debt that you alre someone else, list the creditor in Part 1, and then list the d in Part 1, list the additional creditors here. If you do no | \$9,20 eady listed in Part 1. For e collection agency her ot have additional pers | 4.00 or example, if a collection re. Similarly, if you have | e more than one ny debts in Part 1, |

Schedule D: Creditors Who Have Claims Secured by Property Official Form 106D

page 1 of 1

| Fill in t | this information | to identify your cas | se: | | | | | |
|-----------------------------|--|--|---|---|-----------------------------|---|----------------|--|
| Debtor | 1 Da | rren M. Chancello | or | | | | | |
| | First | Name | Middle Nar | ne L | ast Name | | | |
| Debtor (Spouse i | | Name | Middle Nar | ne I: | ast Name | | | |
| | | | | | | | | |
| United | States Bankrupt | cy Court for the: | :ASTERN DI | STRICT OF WISCO | NISIN | | | |
| Case n | | | | | | | | |
| (if known) |) | | | | | | | Check if this is an amended filing |
| Sche Be as co | mplete and accura | Creditors Who | art 1 for credit | | ims and Pa | art 2 for creditors with NONP | | |
| Schedule D: Credit the Cont | e G: Executory Co tors Who Have Cla inuation Page to th (if known). | ntracts and Unexpired tims Secured by Prope | Leases (Office erty. If more sports of the information | cial Form 106G). Do no pace is needed, copy the to report in a Part, do | t include ar he Part you | in acts on schedule AIB. Fit y creditors with partially sec need, fill it out, number the t Part. On the top of any addi | ured claims | s that are listed in Schedule ne boxes on the left. Attach |
| 1. Do | any creditors have | priority unsecured cla | aims against y | you? | | | | |
| | No. Go to Part 2. | | | | | | | |
| | Yes. | | | | | | | |
| Part 2: | List All of Yo | our NONPRIORITY (| Jnsecured (| Claims | | | | |
| 3. Do | any creditors have | nonpriority unsecure | d claims agai | nst you? | | | | |
| | No. You have nothi | ng to report in this part. | Submit this for | m to the court with your | other sched | lules. | | |
| . | Yes. | | | | | | | |
| clair | m, list the creditor s | eparately for each claim | ı. For each clai | m listed, identify what ty | pe of claim | nolds each claim. If a creditor it is. Do not list claims already priority unsecured claims fill out | included in F | Part 1. If more than one |
| | | | | | | | | Total claim |
| 4.1 | Alliance Coll | ection Ag | L | ast 4 digits of account | t number | 8668 | | \$256.00 |
| | Nonpriority Credito | | | | | Opened 9/27/13 Las | st Active | |
| | Marshfield, V | ess Park Ave VI 54449 | V | When was the debt incu | urred? | 5/01/13 | | |
| | Number Street Cit | y State ZIp Code | | As of the date you file, | the claim is | : Check all that apply | | |
| | Who incurred the | e debt? Check one. | [| ☐ Contingent | | | | |
| | Debtor 1 only | | | ☐ Unliquidated | | | | |
| | Debtor 2 only | | | ☐ Disputed | | | | |
| | Debtor 1 and D | Debtor 2 only | | Type of NONPRIORITY | unsecured | claim: | | |
| | ☐ At least one of | the debtors and anothe | r [| ☐ Student loans | | | | |
| | ☐ Check if this o | claim is for a communect to offset? | • | ☐ Obligations arising ou eport as priority claims | ut of a separ | ration agreement or divorce that | at you did not | t |
| | No | | [| Debts to pension or p | orofit-sharing | g plans, and other similar debts | | |
| | Yes | | ı | Other. Specify Mir | nistry Me | dical Gro | | |

| Americollect Inc | Last 4 digits of account number | 0121 | \$675. |
|---|---|--|--------|
| Nonpriority Creditor's Name | | Opened 5/06/11 Last Active | |
| Po Box 1566 Manitowoc, WI 54221 | When was the debt incurred? | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| □ Yes | ■ Other. Specify Aurora Med | dical Cente | |
| Americollect Inc | Last 4 digits of account number | 919B | \$337. |
| Nonpriority Creditor's Name | | Opened 1/16/12 Last Active | |
| Po Box 1566 Manitowoc, WI 54221 | When was the debt incurred? | 9/01/11 | |
| Number Street City State ZIp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | ■ Other. Specify Radiology | Assoc Of T | |
| Americollect Inc | Last 4 digits of account number | 0830 | \$55. |
| Nonpriority Creditor's Name Po Box 1566 Manitowoc, WI 54221 | When was the debt incurred? | Opened 10/09/13 Last Active 5/01/13 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | _ | | |
| ■ Debtor 1 only | Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| ☐ At least one of the debtors and another | Student loans | | |
| ☐ Check if this claim is for a community debt | _ | ration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Central Wis | sconsin Ra | |

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| Americollect Inc | Last 4 digits of account number | 0119 | \$396.0 |
|--|---|--|----------|
| Nonpriority Creditor's Name | | Opened 5/06/11 Last Active | |
| Po Box 1566 Manitowoc, WI 54221 | When was the debt incurred? | | |
| Number Street City State ZIp Code | As of the date you file, the claim is | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | I claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐Yes | Other. Specify Aurora Med | dical Cente | |
| Americollect Inc | Last 4 digits of account number | FEZ | \$40. |
| Nonpriority Creditor's Name | | Opened 4/03/43 Leet Active | |
| Po Box 1566 Manitowoc, WI 54221 | When was the debt incurred? | Opened 1/03/13 Last Active 2/01/12 | |
| Number Street City State Zlp Code | As of the date you file, the claim is | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐Yes | Other. Specify Sherman C | consulting L | |
| Cap1/Ymaha | Last 4 digits of account number | 1488 | \$8,426. |
| Nonpriority Creditor's Name | | Opened 5/27/15 Last Active | |
| 26525 N Riverwoods Blvd Mettawa, IL 60045 | When was the debt incurred? | 1/01/16 | |
| Number Street City State ZIp Code | As of the date you file, the claim is | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | □ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |

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| Conital One Book Hee N | Last 4 digits of account number | 4005 | ¢4 202 00 |
|---|---|--|------------|
| Capital One Bank Usa N Nonpriority Creditor's Name | Last 4 digits of account number | 4095 | \$1,282.00 |
| 15000 Capital One Dr Richmond, VA 23238 | When was the debt incurred? | Opened 10/20/10 Last Active 5/01/11 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | ■ Other. Specify Credit Card | <u>1</u> | |
| Car Credit Center | Last 4 digits of account number | BS03 | \$4,261.00 |
| Nonpriority Creditor's Name | | Opened 8/25/09 Last Active | |
| 2501 W Wisconsin Ave Appleton, WI 54914 | When was the debt incurred? | 9/11/12 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | ■ Other. Specify deficiency | balance | |
| Cr Sys Fox | Last 4 digits of account number | 2318 | \$198.00 |
| Nonpriority Creditor's Name 630 S. Green Bay R Po Box 528 Neenah, WI 54956 | When was the debt incurred? | Opened 9/13/13 Last Active 6/01/12 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| ☐ Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Riverside | Me | |

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| Cr Sys Fox | Last 4 digits of account number | 4232 | \$191.00 |
|--|---|--|----------|
| Nonpriority Creditor's Name | - | | ******* |
| 630 S. Green Bay R Po Box 528 Neenah, WI 54956 | When was the debt incurred? Opened 3/05/12 Last Active 1/01/12 | | |
| Number Street City State ZIp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐Yes | ■ Other. Specify Thedacare | Ph | |
| Cr Sys Fox | Last 4 digits of account number | 1459 | \$151.00 |
| Nonpriority Creditor's Name | | Opened 9/04/13 Last Active | |
| 530 S. Green Bay R Po Box 528 Neenah, WI 54956 | When was the debt incurred? | 5/01/13 | |
| Number Street City State ZIp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | Unliquidated | | |
| Debtor 2 only | Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | ■ Other. Specify Thedacare | Ph | |
| Cr Sys Fox | Last 4 digits of account number | 3865 | \$142.00 |
| Nonpriority Creditor's Name | | Opened 1/07/13 Last Active | |
| 530 S. Green Bay R Po Box 528 Neenah, WI 54956 | When was the debt incurred? | 10/01/12 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | l claim: | |
| ☐ At least one of the debtors and another | Student loans | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | | ration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| ⊒ Yes | Other Specify Thedacare | Ph | |

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| | | = 6.4.4 | 44.000.0 |
|---|--|---|---|
| Cr Sys Fox Nonpriority Creditor's Name | Last 4 digits of account number | 5641 | \$1,882.0 |
| 630 S. Green Bay R Po Box 528 Neenah, WI 54956 | When was the debt incurred? | Opened 6/07/12 Last Active 9/01/11 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| ■ Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| ☐ At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Thedacare | Ph | |
| Cr Sys Fox | Last 4 digits of account number | 1809 | \$60.0 |
| Nonpriority Creditor's Name | | - | • |
| 630 S. Green Bay R Po Box 528 Neenah, WI 54956 | When was the debt incurred? | Opened 4/11/13 Last Active 6/01/10 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| ☐ Debtor 2 only | ☐ Disputed | | |
| ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| ☐ At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | ■ Other. Specify Riverside | Ме | |
| Cr Sys Fox | Last 4 digits of account number | 5928 | \$60.0 |
| Nonpriority Creditor's Name | | Opened 4/11/13 Last Active | |
| 630 S. Green Bay R Po Box 528 Neenah, WI 54956 | When was the debt incurred? | 8/01/11 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| _ | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| ☐ At least one of the debtors and another | Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| No | ☐ Debts to pension or profit-sharin | • | |
| Yes | Other. Specify Riverside | Me | |

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| Cr Sys Fox | Last 4 digits of account number | 5642 | \$478.00 |
|--|---|--|----------|
| Nonpriority Creditor's Name | | One and 0/07/40 Least Asting | · |
| 630 S. Green Bay R Po Box 528 Neenah, WI 54956 | When was the debt incurred? | Opened 6/07/12 Last Active 11/01/11 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | ■ Other. Specify Thedacare | Ph | |
| Cr Sys Fox | Last 4 digits of account number | 1184 | \$419.00 |
| Nonpriority Creditor's Name | | Opened 6/19/12 Last Active | |
| 630 S. Green Bay R Po Box 528 Neenah, WI 54956 | When was the debt incurred? | 3/01/12 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | ■ Other. Specify Appleton | Med | |
| Cr Sys Fox | Last 4 digits of account number | 1685 | \$409.00 |
| Nonpriority Creditor's Name 630 S. Green Bay R Po Box 528 Neenah, WI 54956 | When was the debt incurred? | Opened 8/13/12 Last Active 3/01/12 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | Student loans | | |
| ☐ Check if this claim is for a community debt ls the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Appleton | Eme | |

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| Cr Sys Fox | Last 4 digits of account number | 1458 | \$228.00 |
|--|---|--|----------|
| Nonpriority Creditor's Name | | | Ψ220.0 |
| 630 S. Green Bay R Po Box 528 Neenah, WI 54956 | When was the debt incurred? | Opened 9/04/13 Last Active 4/01/13 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | □ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | I claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | ■ Other. Specify Thedacare | Ph | |
| Cr Sys Fox | Last 4 digits of account number | 8209 | \$216.00 |
| Nonpriority Creditor's Name | | Opened 9/27/10 Last Active | |
| 630 S. Green Bay R Po Box 528 Neenah, WI 54956 | When was the debt incurred? | Opened 8/27/10 Last Active 4/01/10 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | □ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | ■ Other. Specify Thedacare | Ph | |
| Credit Bureau Data Inc | Last 4 digits of account number | 0298 | \$95.0 |
| Nonpriority Creditor's Name 115 6th St N La Crosse, WI 54601 | When was the debt incurred? | Opened 12/18/15 Last Active 5/01/12 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | _ | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | l claim: | |
| ☐ At least one of the debtors and another | Student loans | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | _ | ration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| □ Yes | ■ Other Specify Kwik Trip I | nc | |

Best Case Bankruptcy

| Credit Coll | Last 4 digits of account number | 7609 | \$103.0 |
|--|--|--|------------|
| Nonpriority Creditor's Name | Last 4 digits of account number | | φ103.0 |
| Po Box 9134 | When was the debt incurred? | Opened 8/13/12 | |
| Needham, MA 02494 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that annly | |
| Who incurred the debt? Check one. | _ | S. Oneon all triat apply | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | ☐ Unliquidated — | | |
| ☐ Debtor 1 and Debtor 2 only | Disputed | | |
| At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? | Type of NONPRIORITY unsecured | i claim: | |
| | ☐ Student loans | | |
| | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Progressiv | /e Insur | |
| Dept Of Ed/Navient | Last 4 digits of account number | 0616 | \$3,240.00 |
| Nonpriority Creditor's Name | | Opened 6/16/00 Last Active | |
| Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 6/16/09 Last Active 1/01/16 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| At least one of the debtors and another | Student loans | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | Other. Specify | | |
| | Student loa | an | |
| Dept Of Ed/Navient Nonpriority Creditor's Name | Last 4 digits of account number | 0806 | \$3,240.00 |
| Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 8/06/08 Last Active 1/01/16 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | I claim: | |
| At least one of the debtors and another | Student loans | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | Other. Specify | | |

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| T 1 Darren M. Chancellor | | Case number (if know) | | |
|---|--|---|-------------|--|
| Dept Of Ed/Navient Nonpriority Creditor's Name Po Box 9635 Wilkes Barre, PA 18773 Number Street City State Zlp Code | Last 4 digits of account number | 1208 | \$11,585.00 | |
| | 9635 Barre, PA 18773 When was the debt incurred? Opened 12/08/10 Last Active 1/01/16 | | | |
| Number Street City State ZIp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | |
| _ | ☐ Contingent ☐ Unliquidated | | | |
| Debtor 1 only | | | | |
| Debtor 2 only | ☐ Disputed | | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | |
| At least one of the debtors and another | Student loans | | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| Yes | ☐ Other. Specify | | | |
| | Student lo | an | | |
| Dept Of Ed/Navient Nonpriority Creditor's Name | Last 4 digits of account number | 1023 | \$10,181.0 | |
| Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 10/23/09 Last Active 1/01/16 | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | |
| ■ Debtor 1 only | ☐ Unliquidated | | | |
| ☐ Debtor 2 only | ☐ Disputed | | | |
| ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | | | |
| ☐ At least one of the debtors and another | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | | | | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | |
| □Yes | Other. Specify | | | |
| | Student lo | an | | |
| Dept Of Ed/Navient Nonpriority Creditor's Name | Last 4 digits of account number | 1128 | \$7,153.0 | |
| Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 11/28/11 Last Active 1/01/16 | | |
| Number Street City State ZIp Code | As of the date you file, the claim i | s: Check all that apply | | |
| Who incurred the debt? Check one. | _ | | | |
| ■ Debtor 1 only | ☐ Contingent | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | | |
| ☐ At least one of the debtors and another | Student loans | | | |
| ☐ Check if this claim is for a community debt | _ | and an area of an divine at the state of the state of | | |
| Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | | | | |
| Yes | Other. Specify Student lo | an | | |

Best Case Bankruptcy

| btor 1 Darren M. Chancellor | | Case number (if know) | | |
|---|---|---|------------|--|
| 9 Dept Of Ed/Navient Nonpriority Creditor's Name | ority Creditor's Name Opened 10/23/09 Last Active 1/01/16 When was the debt incurred? In Street City State Zlp Code As of the date you file, the claim is: Check all that apply | | \$6,415.00 | |
| Po Box 9635 Wilkes Barre, PA 18773 | | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | | | | |
| _ | ☐ Contingent | | | |
| ■ Debtor 1 only | D Onliquidated | | | |
| Debtor 2 only | ☐ Disputed | | | |
| ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | |
| At least one of the debtors and another | Student loans | | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| Yes | Other. Specify | | | |
| | Student loa | an | | |
| Dept Of Ed/Navient Nonpriority Creditor's Name | Last 4 digits of account number | 0805 | \$5,437.0 | |
| Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 8/05/08 Last Active 1/01/16 | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | |
| ■ Debtor 1 only | ☐ Unliquidated | | | |
| Debtor 2 only | ☐ Disputed | | | |
| ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | |
| ☐ At least one of the debtors and another | Student loans | | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | | | |
| ■ No | | | | |
| ☐ Yes | Other. Specify | | | |
| | Student loa | an | | |
| Dept Of Ed/Navient Nonpriority Creditor's Name | Last 4 digits of account number | 0616 | \$5,227.0 | |
| Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 6/16/09 Last Active 1/01/16 | | |
| Number Street City State ZIp Code | As of the date you file, the claim i | s: Check all that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | |
| Debtor 1 only | ☐ Unliquidated | | | |
| Debtor 2 only | ☐ Disputed | | | |
| ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ At least one of the debtors and another | Student loans | | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | | aration agreement or divorce that you did not | | |
| ■ No | Debts to pension or profit-sharing | o plans, and other similar debts | | |
| Yes | ☐ Other. Specify | . , | | |
| ப 162 | Student loa | | | |

| Darren M. Chancellor | | Case number (if know) | |
|---|---|---|------------|
| Dept Of Ed/Navient Nonpriority Creditor's Name Po Box 9635 Wilkes Barre, PA 18773 | Last 4 digits of account number | 1128 | \$5,109.00 |
| | Opened 11/28/11 Last Active 1/01/16 Barre, PA 18773 When was the debt incurred? 1/01/16 | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| lacksquare At least one of the debtors and another | Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| □Yes | Other. Specify | | |
| | Student loa | an | |
| Dept Of Ed/Navient Nonpriority Creditor's Name | Last 4 digits of account number | 1208 | \$4,535.00 |
| Po Box 9635 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 12/08/10 Last Active 1/01/16 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| ■ Debtor 1 only | ☐ Unliquidated | | |
| ☐ Debtor 2 only | ☐ Disputed | | |
| ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| ☐ At least one of the debtors and another | Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐Yes | Other. Specify | | |
| | Student loa | an | |
| Enhanced Recovery Co L Nonpriority Creditor's Name | Last 4 digits of account number | 6623 | \$1,076.00 |
| 8014 Bayberry Rd Jacksonville, FL 32256 | When was the debt incurred? | Opened 9/23/15 Last Active 2/01/14 | |
| Number Street City State ZIp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | Continuent | | |
| Debtor 1 only | ☐ Contingent ☐ Unliquidated | | |
| ☐ Debtor 2 only | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| ☐ At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Dish | | |

| Falls Collection Svc | Last 4 digits of account number | 2063 | \$60.0 |
|---|---|--|---------|
| Nonpriority Creditor's Name | | | |
| Po Box 668 Germantown, WI 53022 | When was the debt incurred? | Opened 1/11/10 Last Active 7/01/09 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| □Yes | ■ Other. Specify Orthopedic | : Specialis | |
| Finance Systems Of G Nonpriority Creditor's Name | Last 4 digits of account number | 9088 | \$55.0 |
| • • | | Opened 4/01/12 Last Active | |
| 301 N Jackson St Green Bay, WI 54301 | When was the debt incurred? | 11/01/11 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt ls the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | ■ Other. Specify Fox Valley | Path | |
| First Premier Bank | Last 4 digits of account number | 0980 | \$468.0 |
| Nonpriority Creditor's Name 601 S Minnesota Ave | When was the debt incurred? | Opened 1/12/10 Last Active 4/01/11 | |
| Sioux Falls, SD 57104 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | _ | or onook an that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | l claim: | |
| ☐ At least one of the debtors and another | Student loans | i ciaini. | |
| ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| — No □ Yes | ■ Other. Specify Credit Card | 01 , | |

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| First Business Bands | Last Adiates of account mountain | 0000 | \$205.0 |
|---|---|--|----------------|
| First Premier Bank Nonpriority Creditor's Name | Last 4 digits of account number | 9309 | \$385.00 |
| 601 S Minnesota Ave Sioux Falls, SD 57104 | When was the debt incurred? | Opened 6/11/09 Last Active 4/01/11 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | ■ Other. Specify Credit Card | <u>I</u> | |
| First State Bank | Last 4 digits of account number | 0001 | \$374.00 |
| Nonpriority Creditor's Name | | Opened 11/09/11 Last Active | |
| 113 W North Water St New London, WI 54961 | When was the debt incurred? | 8/30/12 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Secured | | |
| Get It Now | Last 4 digits of account number | 3549 | \$1,445.00 |
| Nonpriority Creditor's Name | | Opened 12/18/10 Last Active | |
| 5501 Headquarters Plano, TX 75024 | When was the debt incurred? | Opened 12/18/10 Last Active 6/13/11 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| _ | ☐ Disputed | | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | I claim: | |
| ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| ls the claim subject to offset? | roport as priority alaims | | |
| Is the claim subject to offset? ■ No | report as priority claims Debts to pension or profit-sharin | g plans, and other similar debts | |

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| Get It Now | Last 4 digits of account number | 1018 | \$1,039.00 |
|--|--|---|------------|
| Nonpriority Creditor's Name | Last 4 digits of account number | | φ1,033.00 |
| 5501 Headquarters Plano, TX 75024 | When was the debt incurred? | Opened 3/14/11 Last Active 6/24/11 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| □Yes | Other. Specify Installment | t Sales Contract | |
| Get It Now | Last 4 digits of account number | 6119 | \$656.00 |
| Nonpriority Creditor's Name | | Opened 12/29/10 Least Active | |
| 5501 Headquarters Plano, TX 75024 | When was the debt incurred? | Opened 12/28/10 Last Active 6/24/11 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Installment | t Sales Contract | |
| Get It Now | Last 4 digits of account number | 0690 | \$582.00 |
| Nonpriority Creditor's Name 5501 Headquarters Plano, TX 75024 | When was the debt incurred? | Opened 5/12/10 Last Active 6/24/11 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | ,,, | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Installment | t Sales Contract | |

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| en was the debt incurred? of the date you file, the claim is Contingent Unliquidated Disputed e of NONPRIORITY unsecured Student loans Obligations arising out of a separate as priority claims Debts to pension or profit-sharing Other. Specify Money judget t 4 digits of account number | I claim: ration agreement or divorce that you did not g plans, and other similar debts gment 1204 | \$5.508.00 |
|---|--|---|
| Contingent Unliquidated Disputed Le of NONPRIORITY unsecured Student loans Obligations arising out of a separate as priority claims Debts to pension or profit-sharing Other. Specify Money judget Lt 4 digits of account number | I claim: ration agreement or divorce that you did not g plans, and other similar debts gment 1204 | \$5.508.00 |
| Unliquidated Disputed e of NONPRIORITY unsecured Student loans Obligations arising out of a separate as priority claims Debts to pension or profit-sharing Other. Specify Money judget t 4 digits of account number | ration agreement or divorce that you did not g plans, and other similar debts gment | \$5.508.00 |
| Unliquidated Disputed e of NONPRIORITY unsecured Student loans Obligations arising out of a separate as priority claims Debts to pension or profit-sharing Other. Specify Money judget t 4 digits of account number | ration agreement or divorce that you did not g plans, and other similar debts gment | \$5.508.00 |
| Disputed Je of NONPRIORITY unsecured Student loans Obligations arising out of a separate as priority claims Debts to pension or profit-sharing Other. Specify Money judg t 4 digits of account number | ration agreement or divorce that you did not g plans, and other similar debts gment | \$5.508.00 |
| e of NONPRIORITY unsecured Student loans Obligations arising out of a separate as priority claims Debts to pension or profit-sharing Other. Specify Money judget t 4 digits of account number | ration agreement or divorce that you did not g plans, and other similar debts gment | \$5.508.00 |
| Student loans Obligations arising out of a separate as priority claims Debts to pension or profit-sharing Other. Specify Money judg | ration agreement or divorce that you did not g plans, and other similar debts gment | \$5.508.00 |
| ort as priority claims Debts to pension or profit-sharing Other. Specify Money judg t 4 digits of account number | g plans, and other similar debts gment 1204 | \$5.508.00 |
| Other. Specify Money judget 4 digits of account number | 1204 | \$5.508.00 |
| t 4 digits of account number | 1204 | \$5.508.00 |
| ū | | \$5,508.00 |
| en was the debt incurred? | | , ,,,,,,,,, |
| | Opened 12/04/07 Last Active 1/01/16 | |
| of the date you file, the claim is | s: Check all that apply | |
| Contingent | | |
| · · | | |
| • | | |
| Type of NONPRIORITY unsecured claim: | | |
| Student loans | | |
| ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| Debts to pension or profit-sharing | g plans, and other similar debts | |
| Other. Specify | | |
| Student loa | an | |
| t 4 digits of account number | 1204 | \$6,571.00 |
| en was the debt incurred? | Opened 12/04/07 Last Active 1/01/16 | |
| of the date you file, the claim is | s: Check all that apply | |
| Contingent | | |
| Unliquidated | | |
| Disputed | | |
| e of NONPRIORITY unsecured | l claim: | |
| Student loans | | |
| ort as priority claims | , | |
| Debts to pension or profit-sharing | g plans, and other similar debts | |
| Other. Specify | | |
| | of the date you file, the claim in Contingent Unliquidated Disputed The Adigits of account number Disputed Disp | Contingent Unliquidated Disputed e of NONPRIORITY unsecured claim: Student loans Debigations arising out of a separation agreement or divorce that you did not as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Student loan 1204 Opened 12/04/07 Last Active 1/01/16 of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed e of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts |

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| Darren M. Chancellor | | Case number (if know) | | |
|--|--|--|------------|--|
| Navient Nonpriority Creditor's Name Po Box 9500 Wilkes Barre, PA 18773 | Last 4 digits of account number Opened 3/26/07 Last Active 1/01/16 | | \$3,212.00 | |
| | | | _ | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | |
| Debtor 1 only | ☐ Unliquidated | | | |
| Debtor 2 only | ☐ Disputed | | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | |
| At least one of the debtors and another | Student loans | | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | |
| ☐ Yes | ☐ Other. Specify | | | |
| | Student loa | an | | |
| Navient Nonpriority Creditor's Name | Last 4 digits of account number | 0815 | \$1,070.00 | |
| Po Box 9500 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 8/15/07 Last Active 1/01/16 | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | |
| Debtor 1 only | ☐ Unliquidated | | | |
| Debtor 2 only | ☐ Disputed | | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | | |
| At least one of the debtors and another | Student loans | | | |
| ☐ Check if this claim is for a community debt is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | | | |
| No | | | | |
| ☐ Yes | ☐ Other. Specify | | | |
| | Student loa | an | | |
| Navient | Last 4 digits of account number | 0326 | \$6,809.00 | |
| Vonnriority Creditor's Name | | | · | |
| Nonpriority Creditor's Name Po Box 9500 Wilkes Barre, PA 18773 | When was the debt incurred? | Opened 3/26/07 Last Active 1/01/16 | | |
| . , | When was the debt incurred? As of the date you file, the claim i | 1/01/16 | | |
| Po Box 9500 Wilkes Barre, PA 18773 | As of the date you file, the claim i | 1/01/16 | · | |
| Po Box 9500 Wilkes Barre, PA 18773 Number Street City State Zlp Code | As of the date you file, the claim i | 1/01/16 | · | |
| Po Box 9500 Wilkes Barre, PA 18773 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i Contingent Unliquidated | 1/01/16 | | |
| Po Box 9500 Wilkes Barre, PA 18773 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only | As of the date you file, the claim i | 1/01/16 s: Check all that apply | | |
| Po Box 9500 Wilkes Barre, PA 18773 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only | As of the date you file, the claim i Contingent Unliquidated Disputed | 1/01/16 s: Check all that apply | | |
| Po Box 9500 Wilkes Barre, PA 18773 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | As of the date you file, the claim i Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans | 1/01/16 s: Check all that apply | | |
| Po Box 9500 Wilkes Barre, PA 18773 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt | As of the date you file, the claim i Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa | 1/01/16 s: Check all that apply d claim: aration agreement or divorce that you did not | | |

| Portfolio Recovery Ass Nonpriority Creditor's Name | Last 4 digits of account number | 6700 | \$1,212.00 |
|---|--|--|------------|
| | | | |
| Number Street City State Zlp Code | | | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans | | |
| Debtor 1 and Debtor 2 only | | | |
| At least one of the debtors and another | | | |
| ☐ Check if this claim is for a community debt is the claim subject to offset? | | | |
| No | | | |
| Yes | | | |
| Portfolio Recovery Ass | Last 4 digits of account number | 8377 | \$1,209.00 |
| Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 | When was the debt incurred? | Opened 1/25/13 Last Active | |
| Norfolk, VA 23502 | when was the debt incurred? | 11/01/10 | |
| Number Street City State ZIp Code | As of the date you file, the claim is: Check all that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| No | | | |
| Yes | ■ Other. Specify World Fina | ancial Netw | |
| Robl Properties LLC | Last 4 digits of account number | 1887 | \$1,421.33 |
| Nonpriority Creditor's Name 105 Washington Avenue #234 Oshkosh, WI 54901 | When was the debt incurred? | 2003 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| _ | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 and Debtor 2 and | ☐ Disputed | | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| <u></u> | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt is the claim subject to offset? No | ☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin | ration agreement or divorce that you did not | |
| | | a plana and ather similar debte | |

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| Security Fin | Last 4 digits of account number | 1534 | \$704.00 | | | | |
|---|---|---|------------|--|--|--|--|
| Nonpriority Creditor's Name | | | Ψ104.00 | | | | |
| C/O Security Finan Pob 3146 Spartanburg, SC 29304 | When was the debt incurred? | Opened 6/24/11 Last Active 1/30/12 | | | | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | As of the date you file, the claim is: Check all that apply | | | | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | | | | |
| Debtor 1 only | ☐ Unliquidated | | | | | | |
| Debtor 2 only | ☐ Disputed | | | | | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | | | | | |
| At least one of the debtors and another | ☐ Student loans | | | | | | |
| ☐ Check if this claim is for a community debt is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | | | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| □Yes | Other. Specify Unsecured | | | | | | |
| State Collection Servi Nonpriority Creditor's Name | Last 4 digits of account number | 6240 | \$190.00 | | | | |
| 2509 S Stoughton Rd Madison, WI 53716 | When was the debt incurred? | Opened 11/26/12 Last Active 6/01/12 | | | | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | | | | |
| Debtor 1 only | ☐ Unliquidated | | | | | | |
| Debtor 2 only | ☐ Disputed | | | | | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | | | | | |
| At least one of the debtors and another | ☐ Student loans | | | | | | |
| ☐ Check if this claim is for a community debt is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | | | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| Yes | Other. Specify Affinity Me | dical Gro | | | | | |
| State Collection Servi | Last 4 digits of account number | 0533 | \$1,164.00 | | | | |
| Nonpriority Creditor's Name 2509 S Stoughton Rd Madison, WI 53716 | When was the debt incurred? | Opened 12/24/12 Last Active 8/01/12 | | | | | |
| Number Street City State ZIp Code | As of the date you file, the claim i | s: Check all that apply | | | | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | | | | |
| Debtor 1 only | ☐ Unliquidated | | | | | | |
| Debtor 2 only | ☐ Disputed | | | | | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | | | | | |
| At least one of the debtors and another | ☐ Student loans | | | | | | |
| Check if this claim is for a community debt is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | | | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| ☐ Yes | Other. Specify Affinity Me | dical Gro | | | | | |

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| State Collection Servi | Last 4 digits of account number | 6390 | \$200.00 | | | | |
|--|---|---|------------|--|--|--|--|
| Nonpriority Creditor's Name | Last 4 digits of account number | | φ200.00 | | | | |
| 2509 S Stoughton Rd Madison, WI 53716 | When was the debt incurred? | Opened 2/18/13 Last Active 8/01/12 | | | | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | | | | | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | | | | |
| Debtor 1 only | ☐ Unliquidated | | | | | | |
| Debtor 2 only | ☐ Disputed | | | | | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | | | | | |
| At least one of the debtors and another | ☐ Student loans | | | | | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | | | | | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| ☐ Yes | Other. Specify Affinity Me | edical Gro | | | | | |
| State Collection Servi | Last 4 digits of account number | 8095 | \$148.00 | | | | |
| Nonpriority Creditor's Name | | Opened 2/05/42 Leet Active | | | | | |
| 2509 S Stoughton Rd Madison, WI 53716 | When was the debt incurred? | Opened 2/05/13 Last Active 8/01/12 | | | | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | | | | |
| Debtor 1 only | ☐ Unliquidated | | | | | | |
| Debtor 2 only | □ Disputed | | | | | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | | | | | |
| At least one of the debtors and another | ☐ Student loans | | | | | | |
| ☐ Check if this claim is for a community debt steet to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | | | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| Yes | ■ Other. Specify St Elizabet | h Hospita | | | | | |
| State Collection Servi | Last 4 digits of account number | 1340 | \$1,959.00 | | | | |
| 2509 S Stoughton Rd Madison, WI 53716 | When was the debt incurred? | Opened 12/27/12 Last Active 8/01/12 | | | | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | | |
| Who incurred the debt? Check one. | ☐ Contingent | | | | | | |
| Debtor 1 only | ☐ Unliquidated | | | | | | |
| Debtor 2 only | ☐ Disputed | | | | | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | | | | | |
| ☐ At least one of the debtors and another | ☐ Student loans | | | | | | |
| ☐ Check if this claim is for a community debt s the claim subject to offset? | | aration agreement or divorce that you did not | | | | | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| | | th Hospita | | | | | |

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| State of Wisconsin | Last 4 digits of account number | F601 | \$974.10 |
|---|--|---|------------|
| Nonpriority Creditor's Name Winnebago County Clerk of Courts PO Box 2808 | When was the debt incurred? | 2000 | |
| Oshkosh, WI 54903 | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Court Asse | essments | |
| Stumpf Motor Company Inc. | Last 4 digits of account number | 2815 | \$418.20 |
| Nonpriority Creditor's Name 2501 W. College Avenue Appleton, WI 54911 | When was the debt incurred? | 2012 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | d claim: | |
| At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | ■ Other. Specify Money judg | gment | |
| Stumpf Motor Company Inc. | Last 4 digits of account number | AS02 | \$2,643.00 |
| Nonpriority Creditor's Name 2501 W. College Avenue Appleton, WI 54911 | When was the debt incurred? | 2011 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| ☐ At least one of the debtors and another | ☐ Student loans | | |
| ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Deficiency | balance | |

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| .o | arren M | | | | number (if know) | |
|--|---|--|--|--|---|--|
| | | a/Targetcred | Last 4 digits of account number | 3482 | <u>!</u> | \$405 |
| Nonp | onpriority Creditor's Name | | | Onei | ned 1/25/04 Last Active | |
| | Box 673 neapolis | s, MN 55440 | When was the debt incurred? | 12/0 | | |
| | | City State ZIp Code | As of the date you file, the claim is | s: Check | all that apply | |
| _ ` | | he debt? Check one. | ☐ Contingent | | | |
| | ebtor 1 onl | • | ☐ Unliquidated | | | |
| _ | ebtor 2 only | | ☐ Disputed | | | |
| | | Debtor 2 only | Type of NONPRIORITY unsecured | claim: | | |
| ☐ At | t least one | of the debtors and another | ☐ Student loans | | | |
| | | s claim is for a community debt oject to offset? | ☐ Obligations arising out of a separ report as priority claims | ration ag | reement or divorce that you did no | t |
| ■ N | lo | | Debts to pension or profit-sharing | g plans, a | and other similar debts | |
| □ Y | es | | ■ Other. Specify Credit Card | I | | |
| ore than o | one credito n Parts 1 o | r for any of the debts that you lister r 2, do not fill out or submit this pa | <u>-</u> | reditors | here. If you do not have addition | |
| ore than of y debts in e and Add | one credito n Parts 1 or dress | r for any of the debts that you lister 2, do not fill out or submit this pa On Lin Las nounts for Each Type of Unse | ed in Parts 1 or 2, list the additional cage. which entry in Part 1 or Part 2 did you lee of (Check one): Part 4 digits of account number | reditors list the or art 1: Cre art 2: Cre | s here. If you do not have addition riginal creditor? editors with Priority Unsecured Clai editors with Nonpriority Unsecured | nal persons to be notified ims Claims |
| ore than of y debts in e and Add | one credito n Parts 1 or dress dd the Ar nounts of c | r for any of the debts that you lister 2, do not fill out or submit this pa On Lin Las nounts for Each Type of Unse | ed in Parts 1 or 2, list the additional carge. which entry in Part 1 or Part 2 did you lee of (Check one): Est 4 digits of account number | reditors list the or art 1: Cre art 2: Cre | riginal creditor? editors with Priority Unsecured Clai editors with Nonpriority Unsecured burposes only. 28 U.S.C. §159. Ac | nal persons to be notified ims Claims |
| ore than of y debts in e and Add | ne crediton Parts 1 or dress dd the Ar nounts of ded claim. | r for any of the debts that you lister 2, do not fill out or submit this pa On Lin Las nounts for Each Type of Unsecured claims. | ed in Parts 1 or 2, list the additional carge. which entry in Part 1 or Part 2 did you lee of (Check one): Est 4 digits of account number | reditors | riginal creditor? editors with Priority Unsecured Clai editors with Nonpriority Unsecured ourposes only. 28 U.S.C. §159. Ac | nal persons to be notified ims Claims dd the amounts for each |
| ore than of y debts in e and AddoNE- 4: Adda the amunsecure | one credito n Parts 1 or dress dd the Ar nounts of c | r for any of the debts that you lister 2, do not fill out or submit this pa On Line Las nounts for Each Type of Unsecretain types of unsecured claims. Domestic support obligations | ed in Parts 1 or 2, list the additional carge. which entry in Part 1 or Part 2 did you I e of (Check one): Est 4 digits of account number accured Claim This information is for statistical rep | ist the orart 1: Creart 2: Creart 2: Creart 2: Creart 3: | riginal creditor? editors with Priority Unsecured Clai editors with Nonpriority Unsecured ourposes only. 28 U.S.C. §159. Ac Total claim \$ 0. | nal persons to be notified ims Claims dd the amounts for each |
| ore than of y debts in e and Addo NE- 4: Adda the amunisecure | dd the Arnounts of cladim. 6a. 6b. | r for any of the debts that you lister 2, do not fill out or submit this pa On Line Las nounts for Each Type of Unsertain types of unsecured claims. Domestic support obligations Taxes and certain other debts yo | ed in Parts 1 or 2, list the additional carge. which entry in Part 1 or Part 2 did you I e of (Check one): Past 4 digits of account number accured Claim This information is for statistical report of the province of the government of the part of | list the orart 1: Creart 2: Creart 2: Creart 3: Creart 4: Creart 4: Creart 5: Creart 6: Creart 6 | riginal creditor? editors with Priority Unsecured Clai editors with Nonpriority Unsecured courposes only. 28 U.S.C. §159. Ac Total claim \$ 0. | ims Claims dd the amounts for each |
| ore than of y debts in e and AddoNE- 4: Adda the amunsecure | dd the Arnounts of claim. 6a. 6b. 6c. | r for any of the debts that you lister 2, do not fill out or submit this part of the control of | ed in Parts 1 or 2, list the additional carge. which entry in Part 1 or Part 2 did you I e of (Check one): Est 4 digits of account number accured Claim This information is for statistical reputation of the province of the government are while you were intoxicated | list the order of the control of the | riginal creditor? editors with Priority Unsecured Clai editors with Nonpriority Unsecured courposes only. 28 U.S.C. §159. Ac Total claim \$ 0. \$ 0. \$ 0. | ims Claims dd the amounts for each .00 .00 |
| ore than of y debts in e and AddoNE- 4: Adda the amunsecure | dd the Arnounts of cladim. 6a. 6b. | r for any of the debts that you lister 2, do not fill out or submit this part of the control of | ed in Parts 1 or 2, list the additional carge. which entry in Part 1 or Part 2 did you I e of (Check one): Past 4 digits of account number accured Claim This information is for statistical report of the province of the government of the part of | list the orart 1: Creart 2: Creart 2: Creart 3: Creart 4: Creart 4: Creart 5: Creart 6: Creart 6 | riginal creditor? editors with Priority Unsecured Clai editors with Nonpriority Unsecured courposes only. 28 U.S.C. §159. Ac Total claim \$ 0. \$ 0. \$ 0. | ims Claims dd the amounts for each |
| ore than of y debts in e and AddoNE- 4: Adda the amunsecure | dd the Ar nounts of dad claim. | r for any of the debts that you lister 2, do not fill out or submit this part of the control of | ed in Parts 1 or 2, list the additional carge. which entry in Part 1 or Part 2 did you I e of (Check one): Est 4 digits of account number accured Claim This information is for statistical reputation of the province of the government are while you were intoxicated | list the order of the control of the | riginal creditor? editors with Priority Unsecured Clai editors with Nonpriority Unsecured purposes only. 28 U.S.C. §159. Ac Total claim \$ 0. \$ 0. \$ 0. \$ 0. | ims Claims dd the amounts for each .00 .00 |
| ore than of y debts in e and AddoNE- 4: Adda the amunsecure | dd the Ar nounts of dad claim. | r for any of the debts that you lister 2, do not fill out or submit this pa On Line Las nounts for Each Type of Unsertain types of unsecured claims. Domestic support obligations Taxes and certain other debts you claims for death or personal injuice Other. Add all other priority unsecured. | ed in Parts 1 or 2, list the additional carge. which entry in Part 1 or Part 2 did you I e of (Check one): Est 4 digits of account number accured Claim This information is for statistical reputation of the province of the government are while you were intoxicated | list the orart 1: Creart 2: Creart 2: Creart 3: Creart 4: Creart 4: Creart 5: Creart 6: Creart 6 | riginal creditor? editors with Priority Unsecured Clai editors with Nonpriority Unsecured purposes only. 28 U.S.C. §159. Ac Total claim \$ 0. \$ 0. \$ 0. \$ 0. | nal persons to be notified ims Claims dd the amounts for each .00 .00 .00 .00 |
| A: Actain the amunicular that the amunicular t | dd the Ar nounts of ced claim. | r for any of the debts that you lister 2, do not fill out or submit this pa On Line Las nounts for Each Type of Unsertain types of unsecured claims. Domestic support obligations Taxes and certain other debts you claims for death or personal injuice Other. Add all other priority unsecured. | ed in Parts 1 or 2, list the additional carge. which entry in Part 1 or Part 2 did you I e of (Check one): Est 4 digits of account number accured Claim This information is for statistical reputation of the province of the government are while you were intoxicated | list the orart 1: Creart 2: Creart 2: Creart 3: Creart 4: Creart 4: Creart 5: Creart 6: Creart 6 | riginal creditor? editors with Priority Unsecured Clai editors with Nonpriority Unsecured purposes only. 28 U.S.C. §159. Ac Total claim \$ 0. \$ 0. \$ 0. \$ 0. | ims Claims dd the amounts for each .00 .00 .00 .00 |
| ore than of y debts in e and Adol NE- 4: Add the amunisecure I claims in Part 1 | dd the Armounts of cod claim. 6a. 6b. 6c. 6d. | r for any of the debts that you lister 2, do not fill out or submit this part of the control of | ed in Parts 1 or 2, list the additional carge. which entry in Part 1 or Part 2 did you I e of (Check one): Est 4 digits of account number accured Claim This information is for statistical reputation while you were intoxicated ared claims. Write that amount here. | porting p 6a. 6b. 6c. 6d. 6f. | riginal creditor? editors with Priority Unsecured Clair editors with Nonpriority Unsecured curposes only. 28 U.S.C. §159. Accordance Total claim \$ 0. \$ 0. \$ 0. Total Claim \$ 8 0. | ims Claims dd the amounts for each 00 00 00 00 00 00 |
| A: Actain the amunicular that the amunicular t | dd the Arnounts of cladidian. 6a. 6b. 6c. 6d. 6e. | r for any of the debts that you lister 2, do not fill out or submit this part 2, do not fill out | ed in Parts 1 or 2, list the additional carge. which entry in Part 1 or Part 2 did you lee of (Check one): Est 4 digits of account number cured Claim This information is for statistical representations. Write that amount here. | list the orart 1: Creart 2: Creart 2: Creart 2: Creart 3: Creart 4: Creart 4: Creart 5: Creart 5: Creart 6: Creart 6 | riginal creditor? editors with Priority Unsecured Clai editors with Nonpriority Unsecured curposes only. 28 U.S.C. §159. Ac Total claim \$ 0. \$ 0. Total Claim \$ 0. Total Claim \$ 0. | nal persons to be notified ims Claims dd the amounts for each 00 00 00 00 00 00 00 00 00 |
| ore than of y debts in e and Adol NE- 4: Add the amunisecure I claims in Part 1 | dd the Arnounts of cod claim. 6a. 6b. 6c. 6d. 6e. 6f. 6g. 6h. | r for any of the debts that you lister 2, do not fill out or submit this part 2, do not fill out | ed in Parts 1 or 2, list the additional carge. which entry in Part 1 or Part 2 did you le of (Check one): Est 4 digits of account number cured Claim This information is for statistical representations. Write that amount here. | list the orart 1: Creart 2: Creart 2: Creart 2: Creart 3: Creart 4: Creart 4: Creart 5: Creart 5 | riginal creditor? editors with Priority Unsecured Clai editors with Nonpriority Unsecured curposes only. 28 U.S.C. §159. Ac Total claim \$ 0. \$ 0. Total Claim \$ 0. Total Claim \$ 0. Total Claim \$ 0. Total Claim \$ 0. | nal persons to be notified ims Claims dd the amounts for each 00 00 00 00 00 00 00 00 00 |
| ore than of y debts in e and Adol NE- 4: Add the amunisecure I claims in Part 1 | dd the Arnounts of cladidian. 6a. 6b. 6c. 6d. 6e. | r for any of the debts that you lister 2, do not fill out or submit this part 2, do not fill out | ed in Parts 1 or 2, list the additional carge. which entry in Part 1 or Part 2 did you lee of (Check one): Est 4 digits of account number cured Claim This information is for statistical representations. Write that amount here. | list the orart 1: Creart 2: Creart 2: Creart 2: Creart 3: Creart 4: Creart 4: Creart 5: Creart 5: Creart 6: Creart 6 | riginal creditor? editors with Priority Unsecured Clai editors with Nonpriority Unsecured curposes only. 28 U.S.C. §159. Ac Total claim \$ 0. \$ 0. Total Claim \$ 0. Total Claim \$ 0. | nal persons to be notified ims Claims dd the amounts for each 00 00 00 00 00 00 00 00 00 |

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| Fill in this inform | nation to identify your | case: | | |
|---|-------------------------|--------------------|--------------|--------------------------------------|
| Debtor 1 | Darren M. Chance | ellor | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | EASTERN DISTRICT O | DF WISCONSIN | |
| Case number | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | whom you have the | contract or lease | State what the contract or lease is for |
|-----|-------------|--------------|-------------------|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | _ |
| | Name | | | | |
| | Number | Street | | | _ |
| | | | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| 2.7 | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | Oity | | Olalo | 211 O000 | |

| Debtor 1 | Darren M. Cha | ncellor | | | |
|---|--|--|--|--|--------------------------------|
| | First Name | Middle Name | Last Name | | |
| Debtor 2 Spouse if, filing) | First Name | Middle Name | Last Name | | |
| nited States R | ankruptcy Court for th | e: EASTERN DISTRICT OF W | /ISCONSIN | | |
| iilea Glales B | ankraptcy Court for th | e. Enotektion of the | 71000110111 | | |
| ase number known) | | | | Chook if this | 0.00 |
| uiowii) | | | | Check if this amended filin | |
| | | | | <u> </u> | |
| | orm 106H | | | | |
| chedule | H: Your Co | odebtors | | | 12/15 |
| ople are filing it out, and n | g together, both are cumber the entries in | equally responsible for supplying | ng correct informati | complete and accurate as possible. If two ron. If more space is needed, copy the Addition this page. On the top of any Additional Pag | onal Pag |
| 1. Do you h | nave any codebtors? | (If you are filing a joint case, do r | not list either spouse | as a codebtor. | |
| ■ No □ Yes | | | | | |
| | | you lived in a community prope ana, Nevada, New Mexico, Puerto | | ? (Community property states and territories in gton, and Wisconsin.) | clude |
| □ No. Go to | a lina 2 | | | | |
| _ | | spouse, or legal equivalent live wi | th you at the time? | | |
| _ 100. Bid | your opouce, remier | speace, or legal equivalent live th | ar you at are arro. | | |
| | | | | | |
| ■ Ye | es. | | | | |
| | In which community | state or territory did you live? | Wisconsin | . Fill in the name and current address of tha | t nerson |
| | Nichole J. Klotzbi 280 Walnut Street | | | | r pordon. |
| | 280 Walnut Street Manawa, WI 5494 Name of your spouse, forme | g er spouse, or legal equivalent | | | t poroon. |
| in line 2 ag Form 106D fill out Colu | 280 Walnut Street Manawa, WI 5494 Name of your spouse, forme Number, Street, City, State 1, list all of your cod ain as a codebtor or), Schedule E/F (Offi Jumn 2. | t 9 er spouse, or legal equivalent & Zip Code lebtors. Do not include your spo nly if that person is a guarantor | or cosigner. Make s | if your spouse is filing with you. List the per sure you have listed the creditor on Schedul 6G). Use Schedule D, Schedule E/F, or Sche | son shove D (Office |
| in line 2 ag Form 106D fill out Colum | 280 Walnut Street Manawa, WI 5494 Name of your spouse, forme Number, Street, City, State 1, list all of your cod ain as a codebtor or), Schedule E/F (Offi | t 9 er spouse, or legal equivalent & Zip Code lebtors. Do not include your spo ally if that person is a guarantor cial Form 106E/F), or Schedule | or cosigner. Make s | sure you have listed the creditor on Schedule | son shove D (Officed dule G to |
| in line 2 ag Form 106D fill out Colu Colun Name, I | 280 Walnut Street Manawa, WI 5494 Name of your spouse, forme Number, Street, City, State 1, list all of your cod ain as a codebtor or), Schedule E/F (Offi Jumn 2. | t 9 er spouse, or legal equivalent & Zip Code lebtors. Do not include your spo ally if that person is a guarantor cial Form 106E/F), or Schedule | or cosigner. Make s | sure you have listed the creditor on Schedul 6G). Use Schedule D, Schedule E/F, or Sche Column 2: The creditor to whom you owe | son shove D (Officed dule G to |
| in line 2 ag Form 106D fill out Colu Colun Name, I | 280 Walnut Street Manawa, WI 5494 Name of your spouse, forme Number, Street, City, State 1, list all of your cod ain as a codebtor or), Schedule E/F (Offi Jumn 2. | t 9 er spouse, or legal equivalent & Zip Code lebtors. Do not include your spo ally if that person is a guarantor cial Form 106E/F), or Schedule | or cosigner. Make s | Column 2: The creditor to whom you owe Check all schedules that apply: | son shove D (Officed dule G to |
| in line 2 ag Form 106D fill out Colun Name, I | 280 Walnut Street Manawa, WI 5494 Name of your spouse, forme Number, Street, City, State 1, list all of your cod ain as a codebtor or), Schedule E/F (Offi Jumn 2. | t 9 er spouse, or legal equivalent & Zip Code lebtors. Do not include your spo ally if that person is a guarantor cial Form 106E/F), or Schedule | or cosigner. Make s | Column 2: The creditor to whom you owe Check all schedule D, line | son shove D (Officed dule G to |
| in line 2 ag Form 106D fill out Colun Name, I | 280 Walnut Street Manawa, WI 5494 Name of your spouse, forme Number, Street, City, State 1, list all of your cod ain as a codebtor or), Schedule E/F (Offi Jumn 2. 2011 1: Your codebtor Number, Street, City, State and | t 9 er spouse, or legal equivalent & Zip Code lebtors. Do not include your spo ally if that person is a guarantor cial Form 106E/F), or Schedule | or cosigner. Make s | Column 2: The creditor to whom you owe Check all schedule D, line Schedule D, line Schedule E/F, line | son shove D (Officed dule G to |
| in line 2 ag Form 106D fill out Colu Colun Name, I Name Numbe City | 280 Walnut Street Manawa, WI 5494 Name of your spouse, forme Number, Street, City, State 1, list all of your cod ain as a codebtor or), Schedule E/F (Offi Jumn 2. 2011 1: Your codebtor Number, Street, City, State and | ger spouse, or legal equivalent & Zip Code lebtors. Do not include your spouly if that person is a guarantor cial Form 106E/F), or Schedule | or cosigner. Make s G (Official Form 10 | Column 2: The creditor to whom you owe Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line | son shove D (Officed dule G to |
| in line 2 ag Form 106D fill out Colu Colun Name, I Name Numbe City | 280 Walnut Street Manawa, WI 5494 Name of your spouse, forme Number, Street, City, State 1, list all of your cod ain as a codebtor or), Schedule E/F (Offi Jumn 2. 2011 1: Your codebtor Number, Street, City, State and | ger spouse, or legal equivalent & Zip Code lebtors. Do not include your spouly if that person is a guarantor cial Form 106E/F), or Schedule | or cosigner. Make s G (Official Form 10 | Column 2: The creditor to whom you owe Check all schedule D, line Schedule D, line Schedule E/F, line | son shove D (Officed dule G to |
| in line 2 ag Form 106D fill out Colu Colun Name, I Name Numbe City | 280 Walnut Street Manawa, WI 5494 Name of your spouse, forme Number, Street, City, State 1, list all of your coc ain as a codebtor or), Schedule E/F (Offi Jumn 2. nn 1: Your codebtor Number, Street, City, State and r Street | ger spouse, or legal equivalent & Zip Code lebtors. Do not include your spouly if that person is a guarantor cial Form 106E/F), or Schedule | or cosigner. Make s G (Official Form 10 | Column 2: The creditor to whom you owe Check all schedules that apply: Schedule D, line Schedule G, line Schedule G, line Schedule D, line Schedule D, line Schedule E/F, line Schedule D, line | son shove D (Officed dule G to |

| Fill | in this information to identify your c | ase: | | | | | | |
|--------------------|--|--|--------------------------|---|--------------------------|----------------------------|----------------------------|-----------------------------------|
| Del | otor 1 Darren M. C | hancellor | | | | | | |
| 1 | otor 2 puse, if filing) | | | | | | | |
| Uni | ted States Bankruptcy Court for the | EASTERN DISTRICT | OF WISC | CONSIN | | | | |
| | se number lown) | | - | | | | d filing | ostpetition chapter wing date: |
| 0 | fficial Form 106l | | | | Ī | MM / DD/ Y | YYY | |
| S | chedule I: Your Inc | ome | | | | | | 12/15 |
| sup spo atta | as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. **Describe Employment** | are married and not fili r spouse is not filing w | ng jointly ith you, d | , and your spouse is o not include informa | living wit ition abou | h you, incl ut your spo | ude informationse. If more | tion about your space is needed, |
| 1. | Fill in your employment information. | | Debtor | 1 | | Debtor 2 | or non-filing | g spouse |
| | If you have more than one job, | F | ■ Emp | loyed | | ☐ Emplo | oyed | |
| | attach a separate page with information about additional | Employment status | ☐ Not | employed | | ■ Not er | mployed | |
| | employers. | Occupation | | | | Disable | d | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Costc | o | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | V. Integrity Way con, WI 54911 | | | | |
| | | How long employed t | here? | 6 months | | | | |
| Pai | t 2: Give Details About Mor | nthly Income | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. f | you have | nothing to report for an | y line, wri | te \$0 in the | space. Inclu | de your non-filing |
| | u or your non-filing spouse have mo e space, attach a separate sheet to | | ombine th | e information for all em | ployers fo | r that perso | on on the line | s below. If you need |
| | | | | | For De | btor 1 | For Debto | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | | \$1 | ,919.00 | \$ | 0.00 |

Case 16-21644-gmh Doc 1 stilled 02/29/16 Page 43 of 67

+\$

1,919.00

0.00

page 1

0.00

\$

3.

Official Form 106I

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

| | | | | For | Debtor 1 | | or Debtor on-filing s | | |
|-----|-----------------|---|--------|---------|----------------|--------|--------------------------|---------------|--------------------|
| | Сору | line 4 here | 4. | \$ | 1,919.00 | \$ | in-ining s | 0.00 | _ |
| 5. | List a | all payroll deductions: | | | | - | | | _ |
| ٠. | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 349.00 | \$ | | 0.00 | , |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$- | 0.00 | \$ | | 0.00 | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$- | 0.00 | \$ | | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$_ | 0.00 | \$ | | 0.00 | |
| | 5e. | Insurance | 5e. | \$_ | 0.00 | \$ | | 0.00 | _ |
| | 5f. | Domestic support obligations | 5f. | \$_ | 0.00 | \$ | | 0.00 | _ |
| | 5g. | Union dues | 5g. | \$_ | 0.00 | \$ | | 0.00 | |
| | 5h. | Other deductions. Specify: | 5h.+ | · · · · | | +\$- | | 0.00 | _ |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 349.00 | \$ | | 0.00 | _ |
| 7. | Calc | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$_ | 1,570.00 | \$ | | 0.00 | |
| 8. | List a 8a. | All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | | 0.00 | _ |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | | 0.00 | <u> </u> |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | | 193.00 |) |
| | 8d. | Unemployment compensation | 8d. | \$_ | 0.00 | \$ | | 0.00 | <u> </u> |
| | 8e. | Social Security | 8e. | \$_ | 0.00 | \$ | | 0.00 | <u> </u> |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$_ | 0.00 | \$_ | | 0.00 | _ |
| | 8g. | Pension or retirement income | 8g. | \$_ | 0.00 | \$_ | | 0.00 | |
| | 8h. | Other monthly income. Specify: | _ 8h.+ | + \$_ | 0.00 | + \$ _ | | 0.00 |) |
| 9. | Add a | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$_ | | 193.0 | 00 |
| 10. | | ulate monthly income. Add line 7 + line 9. he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | | 1,570.00 + \$_ | | 193.00 | = \$ _ | 1,763.00 |
| 11. | Includ other | all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. It include any amounts already included in lines 2-10 or amounts that are not sify: | deper | | | | Schedul | le J. _+\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certages | | | | | | \$ | 1,763.00 |
| 13. | Do yo | ou expect an increase or decrease within the year after you file this form No. | ? | | | | | Comb | ined ily income |
| | _ | Yes. Explain: | | | | | | | |
| | | · · - · · · · · · · · · · · · · · · | | | | | | | |

| Debtor 1 | Darren M. Chancellor | | Check if this is: | |
|-------------------------|---|---|--|---|
| Debtor 2 | | | An amended filingA supplement sho | wing postpetition chapt |
| Spouse, if filing) | | | | the following date: |
| nited States Ba | nkruptcy Court for the: EASTERN DISTRICT OF WISCO | NSIN | MM / DD / YYYY | |
| ase number f known) | | | | |
| | | | | |
| Official F | Form 106J | | | |
| | le J: Your Expenses | | | 1 |
| nformation. I | te and accurate as possible. If two married people a f more space is needed, attach another sheet to this own). Answer every question. | | | |
| | scribe Your Household joint case? | | | |
| | o to line 2. | | | |
| | loes Debtor 2 live in a separate household? | | | |
| | l No l Yes. Debtor 2 must file Official Form 106J-2, <i>Expense</i> . | s for Separate Household of | Debtor 2. | |
| Do you h | ave dependents? | | | |
| Do not lis and Debte | t Debtor 1 Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| Do not sta | ate the ats names. | Son | 3 | □ No ■ Yes |
| depender | its fiames. | | | ■ Yes □ No |
| | | Daughter | 6 | Yes |
| | | Daughter | 7 | □ No ■ Yes |
| | | | | □ No |
| | | Daughter | 13 | ■ Yes □ No |
| | | Daughter | 14 | ■ Yes |
| expenses | expenses include s of people other than and your dependents? No Yes | | | |
| stimate your | timate Your Ongoing Monthly Expenses • expenses as of your bankruptcy filing date unless yof a date after the bankruptcy is filed. If this is a supple. | ou are using this form as plemental Schedule J, che | a supplement in a Ch ck the box at the top | napter 13 case to repo of the form and fill in |
| ne value of s | nses paid for with non-cash government assistance uch assistance and have included it on <i>Schedule I:</i> | | Your exp | |
| Official Form | 1061.) | | Tour exp | enses |
| | al or home ownership expenses for your residence. It is and any rent for the ground or lot. | nclude first mortgage | 1. \$ | 675.00 |
| If not inc | luded in line 4: | | | |
| 4a. Re | al estate taxes | 48 | a. \$ | 0.00 |
| | perty, homeowner's, or renter's insurance | 41 | o. \$ | 0.00 |
| | me maintenance, repair, and upkeep expenses | | c. \$ | 0.00 |
| | meowner's association or condominium dues | | d. \$ | 0.00 |

| Debtor 1 Darren M. Chancellor | Case number (if known) | |
|-------------------------------|------------------------|--|
|-------------------------------|------------------------|--|

| Debtor 1 | Darren M. Chancellor | Case num | nber (if known) | |
|------------------|---|------------|----------------------|--------------------------|
| 6. Utili | ities: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 100.00 |
| 6b. | Water, sewer, garbage collection | 6b. | \$ | 50.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | · | 55.00 |
| 6d. | Other. Specify: | 6d. | · | 0.00 |
| | d and housekeeping supplies | — 7. | · | 400.00 |
| | Idcare and children's education costs | 8. | | - |
| | | | · — | 0.00 |
| | thing, laundry, and dry cleaning | | \$ | 0.00 |
| | sonal care products and services | 10. | · | 0.00 |
| | dical and dental expenses | 11. | \$ | 0.00 |
| | nsportation. Include gas, maintenance, bus or train fare. not include car payments. | 12. | \$ | 250.00 |
| | ertainment, clubs, recreation, newspapers, magazines, and books | 13. | · <u> </u> | 0.00 |
| | ritable contributions and religious donations | 14. | | |
| | - | 14. | Φ | 0.00 |
| 15. Ins u | | | | |
| | not include insurance deducted from your pay or included in lines 4 or 20. Life insurance | 150 | ¢ | 0.00 |
| | | 15a. | · | 0.00 |
| | . Health insurance | 15b. | · - | 0.00 |
| | . Vehicle insurance | 15c. | · | 0.00 |
| | . Other insurance. Specify: | 15d. | \$ | 0.00 |
| | es. Do not include taxes deducted from your pay or included in lines 4 or 20. | 16 | • | 0.00 |
| | cify: | 16. | Φ | 0.00 |
| | allment or lease payments: | 170 | ¢. | 0.00 |
| | Car payments for Vehicle 1 | 17a. | | 0.00 |
| | . Car payments for Vehicle 2 | 17b. | | 0.00 |
| | Other. Specify: | 17c. | · | 0.00 |
| | . Other. Specify: | 17d. | \$ | 0.00 |
| | ir payments of alimony, maintenance, and support that you did not report as | 10 | ¢ | 0.00 |
| | ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | · | |
| | er payments you make to support others who do not live with you. | | \$ | 0.00 |
| | cify: | 19. | | |
| | er real property expenses not included in lines 4 or 5 of this form or on School | | | |
| | . Mortgages on other property | 20a. | | 0.00 |
| 20b. | . Real estate taxes | 20b. | \$ | 0.00 |
| 20c. | . Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 20d | . Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | . Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| 21. Oth | er: Specify: Cell phone | 21. | +\$ | 250.00 |
| | · · · - · | | | |
| | culate your monthly expenses | | | 4 700 00 |
| | . Add lines 4 through 21. | | \$ | 1,780.00 |
| 22b | . Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 22c. | . Add line 22a and 22b. The result is your monthly expenses. | | \$ | 1,780.00 |
| | | | | |
| | culate your monthly net income. | | • | |
| | . Copy line 12 (your combined monthly income) from Schedule I. | 23a. | | 1,763.00 |
| 23b. | . Copy your monthly expenses from line 22c above. | 23b. | -\$ | 1,780.00 |
| | | | | |
| 23c. | . Subtract your monthly expenses from your monthly income. | | • | 17.00 |
| | The result is your monthly net income. | 23c. | \$ | -17.00 |
| | you expect an increase or decrease in your expenses within the year after yo | | | |
| | example, do you expect to finish paying for your car loan within the year or do you expect your r ification to the terms of your mortgage? | попдаде ра | ayment to increase o | or decrease because of a |
| _ | , , , , | | | |
| = N | | | | |
| | /es. Explain here: | | | |
| | | | | |

| Fill in this inforn | nation to identify you | ur case: | | | |
|---------------------------------|--|-----------------------------|-----------------------------|---|--|
| Debtor 1 | Darren M. Chan | cellor | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bar | nkruptcy Court for the | EASTERN DISTRICT (| OF WISCONSIN | | |
| Case number | | | | | Check if this is an amended filing |
| Official Form Declarati | | an Individual | Debtor's Sc | hedules | 12/15 |
| If two married pe | ople are filing togetl | ner, both are equally respo | onsible for supplying co | rrect information. | |
| obtaining money | | l in connection with a ban | | s. Making a false statement, coin fines up to \$250,000, or imp | |
| Sign | Below | | | | |
| Did you pay | or agree to pay son | neone who is NOT an atto | rney to help you fill out b | pankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. N | ame of person | | | | etition Preparer's Notice, nature (Official Form 119) |
| | ty of perjury, I decla true and correct. | re that I have read the sun | nmary and schedules file | ed with this declaration and | |
| Darren | en M. Chancellor M. Chancellor e of Debtor 1 | | XSignature of | Debtor 2 | |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Date **February 29, 2016**

| Fill in thi | in information to identify. | | | | |
|---------------------------|---|--|---|--|---|
| Debtor 1 | is information to identify y | | | | |
| Deploi | Darren M. Cha First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, f | | Middle Name | Last Name | | |
| | tates Bankruptcy Court for the | | | | |
| Case nur | | | | | |
| (if known) | | | | _ | Check if this is an amended filing |
| | | | | | |
| | al Form 107 | | | _ | |
| Stater | ment of Financia | I Affairs for Individ | duals Filing for B | ankruptcy | 12/15 |
| informati | on. If more space is need | ssible. If two married people ed, attach a separate sheet to | | | |
| number (i | (if known). Answer every q _ | uestion. | | | |
| Part 1: | Give Details About Your | Marital Status and Where Yo | u Lived Before | | |
| 1. Wha | t is your current marital st | atus? | | | |
| _ | Married Not married | | | | |
| 2. Durii | ng the last 3 years, have y | ou lived anywhere other than | where you live now? | | |
| | No | | | | |
| _ | | ou lived in the last 3 years. Do r | not include where you live no | w. | |
| Deb | otor 1 Prior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | Dates Debtor 2 lived there | |
| | | ı ever live with a spouse or le California, Idaho, Louisiana, Ne | | | |
| | No | | | | |
| | Yes. Make sure you fill out | Schedule H: Your Codebtors (C | Official Form 106H). | | |
| Part 2 | Explain the Sources of Y | our Income | | | |
| Fill in | n the total amount of income | employment or from operati you received from all jobs and you have income that you receive | all businesses, including par | t-time activities. | endar years? |
| | No | | | | |
| | Yes. Fill in the details. | | | | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | nuary 1 of current year un you filed for bankruptcy: | wages, commissions, bonuses, tips | \$5,723.00 | ☐ Wages, commissions, bonuses, tips | |
| | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

| Debtor 1 Darren M. Chancellor | | | Case number (if known) | | | | | | | | | |
|-------------------------------|------------|------------------------|------------------------|---------------------------------|-------------------------------|-------------------------------------|----------------------|--|------------|---|----------------|---|
| | | | | | | | | | | | | |
| | | | | | Debtor 1 | | | | | Debtor 2 | | |
| | | | | | Sources of Check all th | | (befo | ss income ore deductions usions) | and | Sources of inco | | Gross income (before deductions and exclusions) |
| | | | dar year: December | 31, 2015) | ■ Wages, bonuses, tip | commissions, | | \$42,494 | 4.00 | ☐ Wages, com bonuses, tips | missions, | |
| | | | | | ☐ Operatin | ig a business | | | | ☐ Operating a I | business | |
| | | | | efore that: 31, 2014) | ■ Wages, bonuses, tip | commissions, | | \$27,210 | 0.00 | ☐ Wages, com bonuses, tips | missions, | |
| | | | | | ☐ Operatin | ig a business | | | | ☐ Operating a l | business | |
| | gamb | oling a ach s No | and lottery | winnings. If yo | ou are filing a | joint case and ye | ou have | e income that yo | ou rece | s; money collecte ived together, list nat you listed in lin | it only once | its; royalties; and under Debtor 1. |
| | | | | | Debtor 1 | | | | | Debtor 2 | | |
| | | | | | Sources of Describe be | | (befo | ss income ore deductions usions) | and | Sources of inco Describe below. | | Gross income (before deductions and exclusions) |
| | | | | ent year until nkruptcy: | Child Sup | port | | \$90 | 0.00 | | | |
| | | | dar year: December | 31, 2015) | Child Sup | port | | \$2,575 | 5.00 | | | |
| Pa | rt 3: | List | Certain P | avments You | Made Before | e You Filed for | Bankrı | uptcv | | | | |
| 6. | Are e | ither | Debtor 1' | s or Debtor 2 Debtor 1 nor D | 's debts prin Debtor 2 has | narily consume | r debts umer d | s? ebts. Consume | er debts | are defined in 11 | U.S.C. § 10 | I(8) as "incurred by an |
| | | | During the | e 90 days befo | ore you filed fo | or bankruptcy, di | id you p | pay any creditor | a total | of \$6,225* or mo | re? | |
| | | | □ No. | Go to line 7 | 7 . | | | | | | | |
| | | | ☐ Yes | paid that cr not include | editor. Do not payments to | include paymer an attorney for t | nts for d his ban | domestic suppo kruptcy case. | rt obliga | | nild support a | ne total amount you nd alimony. Also, do |
| | • \ | Yes. | Debtor 1 | or Debtor 2 o | or both have | primarily consu | umer de | ebts. | | of \$600 or more? | • | |
| | | | _ | · | • | , ,,, | , ' | | | | | |
| | | | ■ No. | Go to line 7 | | | | | | | | |
| | | | □ Yes | include pay | | mestic support o | | | | the total amount ort and alimony. | | creditor. Do not nclude payments to |
| | Cred | ditor's | s Name ar | d Address | I | Dates of payme | ent | Total amou | ınt aid | Amount you still owe | Was this p | ayment for |

| Det | btor 1 Darren M. Chancellor | | Cas | e number (if known) | | |
|-----|---|---|---|---|--------------------------------------|----------------------------------|
| | | | | | | |
| 7. | Within 1 year before you filed for bankru Insiders include your relatives; any general corporations of which you are an officer, dir including one for a business you operate as support and alimony. | partners; relatives of any ger ector, person in control, or ov | neral partners; partners of 20% or more | erships of which your of their voting sec | ou are a genera curities; and any | Il partner; y managing agent, |
| | ■ No□ Yes. List all payments to an insider | | | | | |
| | Yes. List all payments to an insider Insider's Name and Address | Dates of payment | Total amount | Amount you still owe | Reason for t | his payment |
| _ | | | paid | | | |
| 8. | Within 1 year before you filed for bankru insider? Include payments on debts guaranteed or c | | ments or transfer a | any property on a | ccount of a de | ept that benefited ar |
| | NoYes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount | Amount you | Reason for f | his payment |
| | moder o Name and Address | bates of payment | paid | still owe | Include credit | |
| Par | rt 4: Identify Legal Actions, Repossessi | ions, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankru List all such matters, including personal inju modifications, and contract disputes. No Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | e case |
| | Stumpf Motors Inc. v. Chancellor 16-SC-377 | Replevin | Outagamie Cor Court 320 S. Walnut S Appleton, WI 5 | Street | Pending On appea | |
| 10. | Within 1 year before you filed for bankru Check all that apply and fill in the details be No Yes. Fill in the information below. | | erty repossessed, f | oreclosed, garnis | shed, attached | , seized, or levied? |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the |
| | | Explain what happened | d | | | property |
| 11. | Within 90 days before you filed for banks accounts or refuse to make a payment b No Yes. Fill in the details. | | luding a bank or fi | nancial institutio | n, set off any a | mounts from your |
| | Creditor Name and Address | Describe the action the | e creditor took | Date taker | action was | Amount |
| 12. | Within 1 year before you filed for bankru court-appointed receiver, a custodian, of □ No □ Yes | | erty in the possess | | | fit of creditors, a |

| Debtor | Darren M. Chancellor | Case number | (if known) | |
|---------------------|--|--|-----------------------------------|---------------------------|
| | | | | |
| Part 5: | List Certain Gifts and Contributions | | | |
| 13. W i | No | tcy, did you give any gifts with a total value of more | than \$600 per persor | 1? |
| G po | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and | Describe the gifts | Dates you gave the gifts | Value |
| | Address: | | | |
| 14. W i ■ | No | tcy, did you give any gifts or contributions with a totatribution. | al value of more thar | n \$600 to any charity |
| m C | Gifts or contributions to charities that tota nore than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | Describe what you contributed | Dates you contributed | Value |
| Part 6: | <u> </u> | | | |
| | isaster, or gambling? | cy or since you filed for bankruptcy, did you lose any | thing because of the | ft, fire, other |
| | now the loss occurred In | clude the amount that insurance has paid. List ending insurance claims on line 33 of Schedule A/B: roperty. | Date of your loss | Value of property lost |
| Part 7: | | , | | |
| co | lithin 1 year before you filed for bankrupto onsulted about seeking bankruptcy or pre clude any attorneys, bankruptcy petition pre | cy, did you or anyone else acting on your behalf pay eparing a bankruptcy petition? parers, or credit counseling agencies for services require | | erty to anyone you |
| A | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| H 4' A | Helbing Law Office, LLC 177 S. Nicolet Road, Suite 8 Appleton, WI 54914 jh@helbinglaw.com | Attorney Fees | 2/11/16 | \$1,000.00 |
| 60 S A | The Mesquite Group 600 Six Flags Drive Guite 449 Arlington, TX 76011 www.themesquitegroup.org | Credit Counseling Course | 2/26/16 | \$24.00 |
| | www.themesquitegroup.org | | | |

| 17. | pro | nin 1 year before you filed for bankruptcy mised to help you deal with your creditor not include any payment or transfer that you No | rs or to make payment | | | f pay or transfer any prope | rty to anyone who |
|---|---|---|--|-----------------|------------|---|-------------------------------|
| | _ | Yes. Fill in the details. | | | | | |
| | Per | rson Who Was Paid dress | Description and variansferred | alue of any pro | operty | Date payment or transfer was made | Amount of payment |
| Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do no include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | | | |
| | | rson Who Received Transfer | Description and | value of | Das | cribe any property or | Date transfer was |
| | Ad | dress | property transfer | | payr | nents received or debts I in exchange | made |
| | Pei | rson's relationship to you | | | | | |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | of which you are a | |
| | Na | me of trust | Description and value of the property transferred Date Tra | | | | |
| | | | 2 ccop.ii.cii aii.u | | | | made |
| Par | t 8: | List of Certain Financial Accounts, Ins | struments, Safe Deposi | t Boxes, and S | torage Uı | nits | |
| 20. | 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, close sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokera houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | |
| | | No Yes. Fill in the details. | | | | | |
| | _ | me of Financial Institution and | Last 4 digits of | Type of acco | unt or | Date account was | Last balance |
| | | dress (Number, Street, City, State and ZIP | account number | instrument | unit or | closed, sold, moved, or transferred | before closing or transfer |
| 21. | | you now have, or did you have within 1 y h, or other valuables? | ear before you filed fo | r bankruptcy, a | ny safe d | leposit box or other depos | itory for securities, |
| | | No Yes. Fill in the details. | | | | | |
| | Na | me of Financial Institution | Who else had acc | case to it? | Describ | e the contents | Do you still |
| | | dress (Number, Street, City, State and ZIP Code) | Address (Number, S State and ZIP Code) | | Describ | e the contents | have it? |
| 22. | Hav | e you stored property in a storage unit o | or place other than you | r home within 1 | l year bef | fore you filed for bankrupt | су |
| | | Yes. Fill in the details. | | | | | |
| | | me of Storage Facility dress (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, S State and ZIP Code) | | Describ | e the contents | Do you still have it? |
| | | | | | | | |

Official Form 107

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Debtor 1 Darren M. Chancellor

| Pai | rt 9: Identify Property You Hold or Control for | Someone Else | | | | | |
|-----|--|--|---------------------------------------|-----------------------|--|--|--|
| 23. | Do you hold or control any property that someo for someone. | ne else owns? Include any proper | ty you borrowed from, are storing fo | r, or hold in trust | | | |
| | ■ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | | | |
| Pai | rt 10: Give Details About Environmental Informa | ation | | | | | |
| For | the purpose of Part 10, the following definitions | apply: | | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances. | ir, land, soil, surface water, groun | <u> </u> | | | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposal | | law, whether you now own, operate, | or utilize it or used | | | |
| | Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s | | s waste, hazardous substance, toxic | substance, | | | |
| Rep | ort all notices, releases, and proceedings that yo | ou know about, regardless of when | n they occurred. | | | | |
| 24. | Has any governmental unit notified you that you | ı may be liable or potentially liable | under or in violation of an environn | nental law? | | | |
| | ■ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | |
| 26. | Have you been a party in any judicial or adminis | strative proceeding under any envi | ironmental law? Include settlements | and orders. | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | |
| Pai | Tt 11: Give Details About Your Business or Con | nections to Any Business | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, o | did you own a business or have ar | ny of the following connections to an | y business? | | | |
| | ☐ A sole proprietor or self-employed in a t | rade, profession, or other activity, | , either full-time or part-time | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | |
| | ☐ A partner in a partnership | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | |
| | ☐ An owner of at least 5% of the voting or equity securities of a corporation | | | | | | |

Official Form 107

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| Deb | otor 1 Darren M. Chancellor | Ca | ase number (if known) |
|-----------------------|---|---|--|
| | ■ No. None of the above applies. Go to | Part 12. | |
| | _ | Il in the details below for each business. | |
| | Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of the business Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN. Dates business existed |
| 28. | Within 2 years before you filed for bankrup institutions, creditors, or other parties. | otcy, did you give a financial statement to a | nyone about your business? Include all financial |
| | Yes. Fill in the details below. | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | |
| Par | t 12: Sign Below | | |
| are t with 18 U | rue and correct. I understand that making a bankruptcy case can result in fines up to .S.C. §§ 152, 1341, 1519, and 3571. | a false statement, concealing property, or o | declare under penalty of perjury that the answers obtaining money or property by fraud in connection ars, or both. |
| | Darren M. Chancellor rren M. Chancellor | Signature of Debtor 2 | |
| | nature of Debtor 1 | | |
| Dat | e _February 29, 2016 | Date | |
| Did ■ N | | ent of Financial Affairs for Individuals Filin | ng for Bankruptcy (Official Form 107)? |
| | you pay or agree to pay someone who is not lot es. Name of Person Attach the Bankr | | • |

| Fill in this information to identify your case: | | heck one box only as d 22A-1Supp: | directed in this form and | in Form |
|--|---|--|---|--------------------------------|
| Debtor 1 Darren M. Chancellor | | • | | |
| Debtor 2 (Spouse, if filing) | | ■ 1. There is no pres | sumption of abuse | |
| United States Bankruptcy Court for the: Eastern District Case number | t of Wisconsin | applies will be n | to determine if a presum made under <i>Chapter 7 I</i> l iicial Form 122A-2). | |
| (if known) | | | t does not apply now be y service but it could ap | |
| | | ☐ Check if this is a | an amended filing | |
| Official Form 122A - 1 | | | 3 | |
| Chapter 7 Statement of Your C | urrent Monthly Inc | come | | 12/1 |
| Be as complete and accurate as possible. If two married people separate sheet to this form. Include the line number to which the number (if known). If you believe that you are exempted from a military service, complete and file Statement of Exemption from Part 1: Calculate Your Current Monthly Income | he additional information applies. O presumption of abuse because you | n the top of any addition u do not have primarily c | al pages, write your name onsumer debts or becaus | e and case se of qualifying |
| | b. | | | |
| What is your marital and filing status? Check one Not married. Fill out Column A, lines 2-11. | e only. | | | |
| ☐ Married and your spouse is filing with you. Fil | II out both Columns A and B. line | se 2-11 | | |
| ■ Married and your spouse is NOT filing with you | · | .52 11. | | |
| ■ Living in the same household and are not li | · | Calumna A and D. linea | 0.44 | |
| ☐ Living in the same nousehold and are not in ☐ Living separately or are legally separated. F | | | | ı daalara undar |
| penalty of perjury that you and your spouse at living apart for reasons that do not include eva | re legally separated under nonba | nkruptcy law that appli | ies or that you and your | |
| Fill in the average monthly income that you received from a 101(10A). For example, if you are filing on September 15, the 6 6 months, add the income for all 6 months and divide the total the same rental property, put the income from that property in o | month period would be March 1 throupy 6. Fill in the result. Do not include a | igh August 31. If the amou ny income amount more th | int of your monthly income when an once. For example, if bo | aried during the |
| | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| Your gross wages, salary, tips, bonuses, overting all payroll deductions). | ne, and commissions (before | \$\$ | \$ | |
| Alimony and maintenance payments. Do not inclu Column B is filled in. | ide payments from a spouse if | \$ | \$193.00 | |
| 4. All amounts from any source which are regularly of you or your dependents, including child supp from an unmarried partner, members of your housel and roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3 | ort. Include regular contributions hold, your dependents, parents, a spouse only if Column B is not | | \$0.00 | |
| 5. Net income from operating a business, profession | • | | | |
| Once receipts (hefers all deductions) | Debtor 1 \$ 0.00 | | | |
| | -\$ 0.00 | | | |
| Gross receipts (before all deductions) Ordinary and necessary operating expenses | \$0.00 | | | |

Official Form 122A-1

Net monthly income from a business, profession, or farm \$

6. Net income from rental and other real property

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

Chapter 7 Statement of Your Current Monthly Income page 1

0.00

0.00

0.00

0.00

0.00

0.00

\$

-\$

0.00 Copy here -> \$

0.00 Copy here -> \$

Debtor 1

0.00

0.00

| | | | | Column A Debtor 1 | | Column B Debtor 2 or non-filing s | |
|------|---|---|--------------|-----------------------|------------|-----------------------------------|------------------------------|
| 8. | Unemployment compensation | | | \$ | 0.00 | \$ | 0.00 |
| | Do not enter the amount if you contend that the amoun under the Social Security Act. Instead, list it here: | nt received was a bene | efit | | | | |
| | For you\$ | 0. | 00 | | | | |
| | For your spouse \$ | 0. | 00 | | | | |
| 9. | Pension or retirement income. Do not include any arbenefit under the Social Security Act. | mount received that wa | as a | \$ | 0.00 | \$ | 0.00 |
| 10. | Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total below. | Security Act or payme imanity, or international a separate page and p | nts al or | \$ | 0.00 | \$ | 0.00 |
| | | | | \$ | 0.00 | \$ | 0.00 |
| | Total amounts from separate pages, if any. | | | \$ | 0.00 | \$ | 0.00 |
| | 1 7 3 7 | | | | 7 | | |
| 11. | Calculate your total current monthly income. Add li each column. Then add the total for Column A to the to | | \$ | 4,178.00 | + \$ _ | 193.00 | = \$ 4,371.00 |
| | | | | | | | Total current monthly income |
| Part | 2: Determine Whether the Means Test Applies | to You | | | | | |
| 12. | Calculate your current monthly income for the year | | | | | | |
| | 12a. Copy your total current monthly income from line | 11 | | Cop | y line 11 | nere=> | \$4,371.00 |
| | Multiply by 12 (the number of months in a year) | | | | | | x 12 |
| | 12b. The result is your annual income for this part of the | ne form | | | | 12b. | \$52,452.00 |
| 13. | Calculate the median family income that applies to | you. Follow these ste | ps: | | | | |
| | Fill in the state in which you live. | WI | | | | | |
| | Fill in the number of people in your household. | 7 | | | | | |
| | Fill in the median family income for your state and size | | | | | 13. | \$110,159.00_ |
| | To find a list of applicable median income amounts, go for this form. This list may also be available at the bank | | | | | ctions | |
| 14. | How do the lines compare? | | | | | | |
| | 14a. Line 12b is less than or equal to line 13. C Go to Part 3. | On the top of page 1, c | heck box | x 1, <i>There i</i> s | no presui | mption of abus | ee. |
| | 14b. \square Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2. | of page 1, check box 2 | 2, The pi | resumption o | f abuse is | determined b | y Form 122A-2. |
| Part | 3: Sign Below | | | | | | |
| | By signing here, I declare under penalty of perjury | y that the information of | n this st | atement and | in any at | tachments is t | rue and correct. |
| | X /s/ Darren M. Chancellor | | | | - | | |
| | Darren M. Chancellor Signature of Debtor 1 | | | | | | |
| | Date February 29, 2016 MM / DD / YYYY | | | | | | |
| | If you checked line 14a, do NOT fill out or file For | m 122A-2. | | | | | |
| | If you checked line 14b, fill out Form 122A-2 and | file it with this form. | | | | | |
| | | | | | | | |

| Fill in this inforn | nation to identify your | case: | | |
|--|---|----------------------|---|--|
| Debtor 1 | Darren M. Chance | | | |
| Debtor 2 | First Name | Middle Name | Last Name | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the: | EASTERN DISTI | RICT OF WISCONSIN | _ |
| Case number(if known) | | | | ☐ Check if this is an amended filing |
| Official For | | n for Indi | viduals Filing Under Ch | apter 7 12/15 |
| | vidual filing under cha claims secured by yo | - | ill out this form if: | |
| You must file this | ver is earlier, unless th | ithin 30 days afte | not expired. r you file your bankruptcy petition or by the ne time for cause. You must also send copic | |
| | ople are filing togethe d date the form. | r in a joint case, b | oth are equally responsible for supplying co | orrect information. Both debtors must |
| | and accurate as possib our name and case nur | | is needed, attach a separate sheet to this fo | rm. On the top of any additional pages, |
| Part 1: List Yo | our Creditors Who Hav | e Secured Claims | | |
| . For any credito | ors that you listed in P | art 1 of Schedule | D: Creditors Who Have Claims Secured by F | Property (Official Form 106D), fill in the |
| information be Identify the cre | low. editor and the property t | hat is collateral | What do you intend to do with the prope | |
| | | | secures a debt? | as exempt on Schedule C? |
| Creditor's U I | niversal Acceptance | e C | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of property securing debt: | 2008 Chevrolet Co miles | balt 170,000 | ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ■ Yes |
| Part 2: List Yo | our Unexpired Persona | I Property Leases | | |
| For any unexpire n the information | n below. Do not list rea | al estate leases. U | I in Schedule G: Executory Contracts and U nexpired leases are leases that are still in e the trustee does not assume it. 11 U.S.C. § | ffect; the lease period has not yet ended. |
| Describe your ur | nexpired personal pro | perty leases | | Will the lease be assumed? |
| Lessor's name: | | | | □ No |
| Description of lea | sed | | | |
| Property: | | | | ☐ Yes |
| _essor's name: | and | | | □ No |
| Description of lea Property: | sea | | | ☐ Yes |
| l accorde services | | | | П.,, |
| Lessor's name: | | | | □ No |

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Official Form 108

Best Case Bankruptcy

page 1

Statement of Intention for Individuals Filing Under Chapter 7

| Debtor 1 Darren M. Chancellor | Case number (if known) | | | | |
|---|------------------------|--|--|--|--|
| Description of leased Property: | ☐ Yes | | | | |
| Lessor's name: Description of leased Property: | □ No □ Yes | | | | |
| Lessor's name: Description of leased Property: | □ No □ Yes | | | | |
| Lessor's name: Description of leased Property: | □ No □ Yes | | | | |
| Lessor's name: Description of leased Property: | □ No □ Yes | | | | |
| Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. X /s/ Darren M. Chancellor | | | | | |
| Darren M. Chancellor Signature of Debtor 1 | Signature of Debtor 2 | | | | |
| Date February 29, 2016 | Date | | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Wisconsin

| In re | Darren M. Chancellor | | Case No. | | |
|----------------|---|--|--------------------|-------------------------------------|--|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPENSATION | ON OF ATTORN | EY FOR DE | EBTOR(S) | |
| (| Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | |
| | For legal services, I have agreed to accept | | \$ | 1,000.00 | |
| | Prior to the filing of this statement I have received | | \$ | 1,000.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. | S 335.00 of the filing fee has been paid. | | | | |
| 3. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. | ■ I have not agreed to share the above-disclosed compensation v | with any other person un | less they are memb | bers and associates of my law firm. | |
| | ☐ I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the | | | | |
| 6. | In return for the above-disclosed fee, I have agreed to render legal | l service for all aspects of | f the bankruptcy c | ase, including: | |
| 1 | Analysis of the debtor's financial situation, and rendering advice. Preparation and filing of any petition, schedules, statement of a Representation of the debtor at the meeting of creditors and cold. [Other provisions as needed] | affairs and plan which m | ay be required; | | |
| 7. | By agreement with the debtor(s), the above-disclosed fee does not | include the following se | ervice: | | |
| | CERT | IFICATION | | | |
| | certify that the foregoing is a complete statement of any agreeme ankruptcy proceeding. | | yment to me for re | epresentation of the debtor(s) in | |
| F | ebruary 29, 2016 | /s/ Timothy J. Helbi | ng | | |
| \overline{D} | ate | Timothy J. Helbing | 1037603 | | |
| | | Signature of Attorney Helbing Law Office | LLC | | |
| | | 477 S. Nicolet Road | , Suite 8 | | |
| | | Appleton, WI 54914 920-955-3688 Fax: | | | |
| | | tjh@helbinglaw.cor | | | |
| L | | Name of law firm | | | |
| | | | | | |

United States Bankruptcy Court Eastern District of Wisconsin

| In re | Darren M. Chancellor | | Case No. | | | | | | |
|--|---------------------------------|--------------------------|----------|---|--|--|--|--|--|
| | | Debtor(s) | Chapter | 7 | | | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | | | | |
| The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge. | | | | | | | | | |
| Date: | February 29, 2016 | /s/ Darren M. Chancellor | | | | | | | |

Signature of Debtor

Alliance Collection Ag 3916 S Business Park Ave Marshfield, WI 54449

Americollect Inc Po Box 1566 Manitowoc, WI 54221

Cap1/Ymaha 26525 N Riverwoods Blvd Mettawa, IL 60045

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Car Credit Center 2501 W Wisconsin Ave Appleton, WI 54914

Cr Sys Fox 630 S. Green Bay R Po Box 528 Neenah, WI 54956

Credit Bureau Data Inc 115 6th St N La Crosse, WI 54601

Credit Coll Po Box 9134 Needham, MA 02494

Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773

Enhanced Recovery Co L 8014 Bayberry Rd Jacksonville, FL 32256

Falls Collection Svc Po Box 668 Germantown, WI 53022

Finance Systems Of G 301 N Jackson St Green Bay, WI 54301

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

First State Bank 113 W North Water St New London, WI 54961 Get It Now 5501 Headquarters Plano, TX 75024

Get It Now, LLC 848 Fox Point Plaza Neenah, WI 54956

Navient Po Box 9500 Wilkes Barre, PA 18773

Portfolio Recovery Ass 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Robl Properties LLC 105 Washington Avenue #234 Oshkosh, WI 54901

Security Fin C/O Security Finan Pob 3146 Spartanburg, SC 29304

State Collection Servi 2509 S Stoughton Rd Madison, WI 53716

State of Wisconsin Winnebago County Clerk of Courts PO Box 2808 Oshkosh, WI 54903

Stumpf Motor Company Inc. 2501 W. College Avenue Appleton, WI 54911

Td Bank Usa/Targetcred Po Box 673 Minneapolis, MN 55440

Universal Acceptance C 10801 Red Circle Dr Minnetonka, MN 55343